

OFFICIAL ENTRY FORM

Contestant Information

First Name _____ Last Name _____

Email _____ Phone _____ Age _____

Address _____ City _____ St _____

Zip Code _____

Please read this application carefully before signing below:

I grant the Jeffersonville Township Public Library the exclusive rights to freely reproduce, distribute, and publicity display, in whole or in part, any entry that I submit to the Card Design Contest. This includes the use of the name and likeness of individuals represented in the entry design.

I confirm that before submitting the Contest entry, I have obtained all permissions required for the Jeffersonville Township Public Library to exercise the rights outlined in this document.

By signing below, I confirm that I have read and agree to the rules and stipulations outlined in this and all support documents.

Contestant Signature: _____

All contestants under the age of 18 must have the bottom portion completed by a parent or legal guardian.

Parent or Legal Guardian Release:

I, (Please Print) _____, am the parent or legal guardian of
Contestant (Please Print) _____.

My signature on this application confirms my agreement to the entry rules on the Participant's behalf.

Parent or Legal Guardian Signature: _____.