



Entry Form

Please Fill Out Completely

Name: _____ Phone: _____

Address: _____

City/State/Zip: _____

Email: _____

Amount Paid: _____ Method of Payment: _____

A. Title: _____

Media: _____ Price: _____

B. Title: _____

Media: _____ Price: _____

C. Title: _____

Media: _____ Price: _____

D. Title: _____

Media: _____ Price: _____

E. Title: _____

Media: _____ Price: _____

Affix to Back of Artwork

A. Title: _____

Media: _____

Name: _____

B. Title: _____

Media: _____

Name: _____

C. Title: _____

Media: _____

Name: _____

D. Title: _____

Media: _____

Name: _____

E. Title: _____

Media: _____

Name: _____