

**Weston Park Granary Art Gallery
Halls Young Artist Competition 2019**



**ENTRY FORM TO BE COMPLETED BY
TEACHER** One entry form to be filled in for each school class

Please complete and return this form along with **images** of your pupils' artworks and their **individual entry forms** by **Friday 25th October 2019** to:

Katherine.dowd@weston-park.com or

**Halls Young Artist Competition,
Weston Park Enterprises Ltd,
Weston-Under-Lizard,
Nr. Shifnal,
Shropshire, TF11 8LE**

Please ensure that each image is labelled with pupil name and title of artwork.

Please call 01952 852130 if you have any questions.

FOR OFFICIAL USE ONLY.
FORM NO.

INITIAL	DATE RECEIVED	
FORM COMPLETED:		EMAIL
NUMBER IMAGES:		

BLOCK LETTERS PLEASE

SCHOOL'S DETAILS	
SCHOOL:	
TEACHER'S NAME:	
SCHOOL ADDRESS:	
SCHOOL POSTCODE:	
TEL NO:	TEACHER'S EMAIL :

Please state where you heard about the Granary Halls Young Artist Competition:

Weston Park Website: Leaflet sent to school: Other (please state):

I agree on behalf of my pupils to the conditions of the Exhibition as outlined in the Information Pack.
I understand that Weston Park is not responsible for any insurance of the works entered.
I agree to images of my pupils' work being reproduced for publicity of the Exhibition.
I have retained a copy of this completed form and that of my pupils for my files.

SIGNED:	DATE: DD / MM / YYYY
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ENTRY FORM TO BE COMPLETED BY PUPIL

One entry form to be filled in by each pupil

BLOCK LETTERS PLEASE

PUPIL INFORMATION
SURNAME:
FORENAME:
D.O.B:
YEAR GROUP:

DETAILS OF SUBMITTED WORK(S):
PIECE 1
TITLE:
DATE:
MEDIUM:
DIMENSIONS: (in centimetres)
REQUIREMENTS FOR DISPLAY:

DETAILS OF SUBMITTED WORK(S):
PIECE 2
TITLE:
DATE:
MEDIUM:
DIMENSIONS: (in centimetres)
REQUIREMENTS FOR DISPLAY:
PIECE 3
TITLE:
DATE:
MEDIUM:
DIMENSIONS: (in centimetres)
REQUIREMENTS FOR DISPLAY: