



Sharing Our Stories: Learning from Others, Young and Old

(Children Entry Form; Please Print Clearly or Type)

2019 Art/Poster Contest Official Entry Form

First Name _____ Last Name _____

Age _____ Date of Birth ____/____/____

Grade Completed (in June of 2019) _____

Grade Level (circle one): K-1 2-3 4-6 7-9 10-12

Name of School _____

Name of Development Where Child Lives _____

Child's Address _____

Child's Phone Number _____

Name of Child's Parent or Guardian _____

Name of Resident Manager _____

Resident Manager Phone Number _____

Resident Manager Email Address _____

Name of Management Company for Development _____

Name of AHMA _____

Please Fill Out This Form in Its Entirety



**AGREEMENT WITH RESPECT TO PRIZE
IN NAHMA ART/POSTER/CALENDAR CONTEST**

In accepting the prize in the NAHMA **Sharing Our Stories: Learning from Others, Young and Old** Art/Poster Contest, I, _____ hereby represent that I am eligible to receive this prize under the contest rules on eligibility.

In consideration of the award of the prize to me, I hereby agree as follows:

1. I hereby transfer and assign to NAHMA all my rights, title and interest in my entry in the 2019 **Sharing Our Stories; Learning from Others, Young and Old** Art/Poster Contest, including all copyright or other intellectual property rights. My entry shall hereinafter become the sole property of NAHMA and may be used in such publicity, publications and advertisements as NAHMA may see fit.
2. I hereby give NAHMA, its members and/or affiliates the absolute right and permission to use my artwork and photo for publicity purposes and to make reproductions in any media and to copyright in its own name, and/or publish, and/or market, and/or assign such images without compensation.

I hereby acknowledge that I have read this document and that I understand and agree to its terms.

Recipient's Signature: _____

Print Recipient's Name: _____

Recipient's Social Security Number: _____

Recipient's Date of Birth: _____

Parent/Guardian's Signature: _____

**if applicable*

Print Parent/Guardian's Name: _____

**if applicable*

Date: _____

** Applies Only to Participants That Are Under the Age of 18.*