



Office use only:

ENTRY # \_\_\_\_\_

## headspace Elsternwick Art Competition 2015

### ENTRY FORM

*(Please print this form and submit it with your art piece)*

Name (please print):

Address:

Contact number:

Email address:

How did you hear about the competition?

Age:  12-15  16-18  19-25

Do you consent to your artwork being displayed at headspace Elsternwick after the competition?  
*(This is NOT a requirement of entry.)*  YES  NO

Artwork title *(recommended)*:

Artist's statement *(recommended)*:

I have read and agree to the Terms and Conditions of entry:  YES  
*(Available at [headspace.org.au/headspace-centres/elsternwick](http://headspace.org.au/headspace-centres/elsternwick))*

I understand that if I wish to keep my entry, it must be picked up from headspace Elsternwick by December 18<sup>th</sup> 2015:  YES

I understand that a photo of my entry will be displayed on the headspace Elsternwick facebook page alongside my first name, age category, and artist's statement in order for People's Choice voting to occur:  YES

---

Signature

---

Date