Thank you for your interest in the Congressional Art Competition. In order to better serve you, this form will allow you to go to a printable page that should be mailed to the office for processing.

**Contact Information**

* indicates required information

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First Name *:
Last Name: *:
Parents/Guardians *:
Street Address *:
City, State Zip Code *: ,
Telephone Number *:
Email *:
Entry Title*:

## Education Information

Name of High School*:
Grade *:
Art Teacher *:
Phone *:

## Medium-Please Select One

Painting Drawing Print
Mixed Media Computer Graphic Photography

## Print This Form