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

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