

Celebrate Australia 2018

Entry Form

Prep - Year 2

NAME: _____

(PLEASE USE CAPITAL LETTERS)

SCHOOL: _____

YEAR/CLASS: _____ AGE: _____

HOME CONTACT DETAILS: _____

PHONE: _____

TITLE OF ARTWORK: _____

MEDIUM (please tick all that apply) Pencil Paint Felt pen Collage Other

For records, publicity purposes and for display in a digital format, the Gladstone Regional Council will reproduce all artworks submitted.

Parent/Guardian/Teacher signature: _____

Date: _____

Conditions of entry:

Limit of 1 entry per artist, composed on a sheet of A4 paper with the artist's name printed on the back and accompanied by this entry form. Submissions close 4pm, Friday 15 December 2017 and can be delivered to the Gladstone Regional Art Gallery & Museum, cnr Goondoon & Bramston Streets, Gladstone or posted to PO Box 29 Gladstone QLD 4680

Winners will be announced during Gladstone Regional Council's Australia Day celebrations Friday, 26 January 2018.

In 2018, entries will be displayed on the Mezzanine Floor, Leo Zussino Building CQUniversity Gladstone Marina Campus during January, the Visitors Centre Gallery, Gladstone Tondoon Botanic Gardens during February and the Gallery & Museum during March. Digitised exhibitions of entries will also be displayed at selected Council venues from January to April.

Winners will receive some fantastic prizes including a Gladstone Cinemas Family Pass (2A & 2C) and their original works will be sent to Saiki City, Japan in conjunction with Japanese Children's Day events during June 2018.

For more information, please contact: Cultural Projects Supervisor, Di Paddick on 4976 6766 email: gragm@Gladstonerc.qld.gov.au or visit <http://gragm.qld.gov.au> online.

The Gladstone Regional Council is collecting the personal information to process this entry form. The information will be only accessed by authorised employees within the Council. Your information will not be given to any other person or agency unless you have given us permission or we are required by law.

Celebrate Australia 2018 Entry Form Year 3 - 6

NAME: _____

(PLEASE USE CAPITAL LETTERS)

SCHOOL: _____

YEAR/CLASS: _____ AGE: _____

HOME CONTACT DETAILS: _____

PHONE: _____

TITLE OF ARTWORK: _____

MEDIUM (please tick all that apply) Pencil Paint Felt pen Collage Other

DESCRIPTION/STORY/ARTIST STATEMENT _____

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