



"Darion's Rise" Art Contest – Official Entry form

Contest Participant

First Name: _____ Last Name: _____

Age: _____

Birth Date: ____ / ____ / ____

Gender: Male / Female

Full Street Address:

Home Phone: (____) _____ - _____

Entries must be received by October 24, 2009. Contest ends November 9, 2009.

Parent(s) / Guardian(s)

First Name: _____ Last Name: _____

Full Street Address:

Home Phone: (_____) _____ - _____

**I give my child permission to enter the Darien's Rise contest. I also give permission for WhitsEnd.org to post my child's created image online.
If you are filling out this form on the computer, type "I give permission" in the box below.**

Parent/Guardian Signature: _____