



ARTIST INFORMATION					
Name:					
Street/PO Box:	City/ST/Zip:	City/ST/Zip:			
Phone:	Email:				
ARTWORK INFORMATION					
Title of entry:		 For Exhibit Only Competition Entry 			
Dimensions:	Year art created:	Artis curr	st's ent age:		
Was Artwork Entered In Previous Competition: : 🗆	Yes 🗆 No	Year Ente	r ered:		
Resident of Presbyterian Manor Community: D Yes	D No				
Category: Christmas Drawing Fiber Arts	Painting	Entry is:			
□ Sculpture/3-D □ Photography □ M	lixed Media/Crafts	Original	work of your own design		
🗅 Quilting: 🗅 Machine-stitched 🗅 Hand-stitche	d D Needlework	□ Created	from a kit or pattern		
Please check one: (Art teachers and artists who sell their their own enjoyment should enter as amateurs.) Professional Designation Brief artist's biography (50-75 words) for this work:			(continue on back if needed).		
CONSENT					
If your art is selected as a winner in the Art is Ageless [®] of information, including photographs, may be shared with the Mid-America websites, Art is Ageless website, and Facebook	ne media and may be p	osted on the	e Presbyterian Manors of		
Artist or Representative Signature:	C	ate:			
ARTWORK LABEL (Please complete and atta	ch securely to artu	vork) 🔀	* * * * * *		
Name	Title				
Address/PO Box					
City/ST/Zip			□ Amateur		
			Rev. 10/2020 PMMA M-AIA 801		



Release of Liability Form for all

Name	
Phone Number	_ Email
Presbyterian Manor community	
Title of Artwork	
Entry Category E (Please provide copy of appraisal or bill	est. Value \$ of sale of comparable work to verify value.)
Description of artwork	

I understand that Presbyterian Manors of Mid-America Inc. will handle my artwork with care and respect, but that unforeseen accidents can happen. I will not hold Presbyterian Manors of Mid-America liable for damage to my entry. I understand that in the event of theft, Presbyterian Manors of Mid-America will reimburse me at a normal value allowable by the company's insurance provider, pursuant to provision of a certified appraisal of the work in question.

Signature of Artist or Representative Date		Date
Date	Signature of Artist or Representative	
Date		
Signature of Witness (if applicable)		Date

In the event my artwork is selected to advance to the masterpiece level, I authorize the art to be transported to an approved PMMA location for photography purposes.

Date			

Signature of Artist or Representative

Date

Signature of Witness (if applicable)

