LEOTA BRAUN CHARITABLE FOUNDATION ENTRY FORM

Contact Details – Artist #1		
Name:		
Address:		
City:	State:	Zip code:
Phone:	Email:	
School [if applicable]:		

Contact Details – Artist #2		
Name:		
Address:		
City:	State:	Zip code:
Phone:	Email:	
School [if applicable]:		

**If additional artists are responsible for the logo design, please copy this form and complete/sign, as needed*

Logo Description
Please describe the symbolism behind your logo design:

Required Signature[s]	
By participating in the Leota Braun Charitable Foundation Logo Design Contest, each entrant represents and warrants the s/he has read and agrees to be bound by the contest's official rules. Each entrant further understands that if her/his logo design is selected as the winner, s/he will relinquish all claims, rights (including any moral rights) and benefits related to the display, modification, reproduction, publication, distribution, use and other exploitations of the work, other than the prize awarded to the winning entry. This form must accompany all contest submissions.	
Signature – Artist #1:	**Date:**
Signature – Artist #2:	**Date:**