

**AITC Calendar Art Contest - 2019 Official Entry Form
K-3rd Grade Only**

Student's Name: _____

Grade: _____

Teacher or Parent Name: _____

Email: _____

School Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

By submitting your entry you agree to the conditions of the contest.

Check if submitted by parent.

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