

2023 KASEC's Dream Art Contest Official Entry Form

Artist's information

Artist's First Name	Last Name		Age	_ □ Male □ Female	
Diagnosis	From what organiz	From what organization did you hear about this event?			
Brief introduction about the Art	ist				
Title (name) of artwork					
2-3 sentences about the Artwo	rk				
Parent/Guardian information	(If the artist is over 18,	put artis	t's information)		
Name of parent/guardian			Relationship		
Address					
City	St	ate	Zip code		
Phone	Email				
Consent for Use of artwork					
I,, publicly promote awareness ab fundraiser and promotional iter	oout developmental disab				
Artist over 18 or parent/guardia	an's signature		Date	<u>-</u>	
Sponsored by			Submiss	ion Deadline:	

open bank



Questions?

program@kasecca.org

562-926-2040

July 28, 2023 Friday 5pm

Drop off or mail in your artwork at 1661 N Raymond Ave. STE 109, Anaheim, CA 92801