



2009-10 RESS Clinkie Medallion Entry Form

Artist Name: _____

Studio Name: _____

Address: _____

City: _____ State/ Prov.: _____

Country: _____ Zip/Postal Code: _____

Phone #: _____ Email: _____

#1 Title of Piece: _____

Media: _____ Species/Breed/Type Depicted: _____

Additional notes: _____

#2 Title of Piece: _____

Media: _____ Species/Breed/Type Depicted: _____

Additional notes: _____

By entering this exhibition I am acknowledging that I have read and agree to all terms and conditions as stated in the 2009-10 RESS Clinkie Rules. Any entrant under the age of 18 must have a parent/guardian sign this entry form.

Artist Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Printed: _____

:

**Send with your CD by
the due date to:**

**Cheryl Farrens, RESS
P.O. Box 103
Campbell TX 75422**

Office use:

PayPal _____

Check _____