

## Community Art for a Deadly Project Competition: Entry Form (Part C)

<b>Name:</b>	
<b>I am submitting:</b>	<input type="checkbox"/> A name for the project (attached) <input type="checkbox"/> A logo for the project (attached)
<b>Contact Phone:</b>	
<b>Contact E-mail Address:</b>	
<b>Story about the art I am submitting:</b> <i>(feel free include an additional page if there is not enough space here)</i>	
<b>Meaning behind the name I chose:</b> <i>(feel free include an additional page if there is not enough space here)</i>	
<b>Consent for use:</b>	<p>The design and editing of my entry is solely my own work. I agree that I have read and consent to the Terms &amp; Conditions of the competition. I understand that my entry/entries become the property of South Western Sydney Local Health District (SWSLHD) and Western Sydney University. If my entry is selected I relinquish all claims to any and all copyrights. I consent for SWSLHD and Western Sydney University to use my name, and in particular, the winning logo and name (with their respective stories/meanings) for the purpose of promoting the research project to promote oral health among Aboriginal families and to be reproduced in any materials relating to the project, without any remuneration, other than the prize awarded the winning entry/entries.</p>
<b>Signature:</b>	
<b>Date:</b>	

*Please submit this entry form with your submission*