

**BUS WRAP DESIGN CONTEST ENTRY FORM**

Please complete and return this form with the artwork.

Child's Name: \_\_\_\_\_

Parent's/Guardian's Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Child's Age: \_\_\_\_\_

**RELEASE AGREEMENT**

I certify that the artwork I have created and submitted to Lextran is original. I understand that, upon submitting my design, I give up any claim to ownership, and my design becomes the sole property of Lextran. I agree that Lextran may use my name, photographs, artwork, and words with any necessary changes or alterations in current and future promotions.

Parent's/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(by which parent/guardian accepts above release agreement; required for entrants under 18)