

North Atlantic Right Whale Art Submission

Participant Name: _____

Participant Age: _____

Contact Email: _____

Art Submission Release:

I, _____, understand that by submitting my artwork to Clearwater Marine Aquarium, I am voluntarily and knowingly waiving, releasing and transferring any and all of my rights for the use of this artwork to Clearwater Marine Aquarium.

I hereby attest that I am the owner and original creator of this artwork or a parent/guardian of the artist.

I hereby grant permission for my submitted artwork to be used by Clearwater Marine Aquarium. I understand my artwork will be used by Clearwater Marine Aquarium, for any matter consistent with the marketing or mission of Clearwater Marine Aquarium.

In addition, I agree to have the artist's name and age identified in conjunction with the selected artwork, and acknowledge that I have read, understand and agree to the submission guidelines. I also agree to be contacted at the email address listed above and receive future communications from Clearwater Marine Aquarium.

Printed Name

Parent/Guardian Printed Name (If under 18)

Signature

Parent/Guardian Signature (If under 18)

Date

Date