

ENTRY FORM



HILLS SHIRE COUNCIL ORANGE BLOSSOM FESTIVAL 2017
ANNUAL CHILDREN'S ART AWARDS
Presented by CASTLE HILL ART SOCIETY INC.
Harvey Lowe Pavilion, Castle Hill Showground
Showground Road, Castle Hill

Exhibition dates: Opening Night Thursday 14th September, 7pm for 7.30pm
Exhibition – Friday 15th September to Sunday 17th September, 9am to 4pm daily

Entry fee: **\$4 per artwork (limit 2 paintings, 1 sculpture) with entry form returned to:**
Secretary, PO Box 181, Castle Hill 1765 NO LATER THAN Friday 25th August, 2017.

Delivery of paintings: Tuesday 12th September – 1pm – 5pm (Harvey Lowe Pavilion)

Collection of paintings: Sunday 17th September - 4pm to 5pm

SPECIAL CONDITIONS

1. Title, name and contact details must be on back of work or, if sculpture, a label attached.
2. Works on paper must be framed, oil/acrylic framed or on a stretcher frame with staples at back – cord attached in such a manner that it will not come apart from the work – stapled to frame – **no repairs to enable hanging will be carried out after delivery. No metal or sharp edges.**
3. The judge's decision is final.
4. All care taken but no responsibility for loss or damage.
5. Entries must be recent work of the participating artist.
6. **NB** Ages 5 – 10 years – NO LARGER THAN 49 x 58 cms READY TO HANG
Ages 11 – 16 years – NO LARGER THAN 58 x 76 cms READY TO HANG

PRESENTATION TO WINNERS ON OPENING NIGHT Sponsor: Rotary Club of Castle Hill

Please return this section completed by parent or in very legible writing by student. Enquiries 9899 3179

Age	Title of Work
5 – 7 years	1.
	2.
Sculpture	1.
	2.
8 – 10 years	1.
	2.
Sculpture	1.
	2.
11-13 years	1.
	2.
Sculpture	1.
	2.
14-16 years	1.
	2.
Sculpture	1.

Name: Tel no:

Address: P/code:.....

I ACKNOWLEDGE THAT THE 'SPECIAL CONDITIONS' ABOVE HAVE BEEN READ AND UNDERSTOOD.
SIGNATURE OF PARENT

PLEASE COMPLETE AND SIGN THE INDEMNITY AND WAIVER ON REVERSE OF THIS FORM

Participants Indemnity and Waiver

Risk Warning

The CHAS advises that participation may result in property damage and/or personal injury including death.

TO BE SIGNED BY PARTICIPANT OVER 18 YEARS OF AGE

1. I, the signatory acknowledge, agree and understand that participation in the show, including passive participation may contain an element of risk of injury and I agree and that I undertake any such risk voluntarily of my own free will and at my own risk.
2. I, the signatory acknowledge agree and understand that the risk warning constitutes a 'risk warning for the purposes of Division 5 of the Civil Liability Act 2002 (NSW)'.
3. I, the signatory acknowledge the risk referred to above and agree to waive any and all rights that I or any other person claiming through me, may have against the Castle Hill Art Society in relation to any loss or injury (including death) that is suffered by me as a result of the undersigned's participation in the show.
4. The signatory must continually indemnify the Castle Hill Art Society on a full indemnity basis against any claim or proceeding that is made, threatened or commenced and any liability, loss (including consequential loss and loss of profits) damages or expenses (including legal costs on a full indemnity basis) that the Castle Hill Art Society incurs or suffers as a direct or indirect result of the participant's participation in any event held.

I have read this indemnity and Waiver form and acknowledge and agree with its contents. I have made further enquires which I feel are necessary or desirable and full understand the risks involved in this activity.

Name _____

Address _____

Signature _____ Date _____

TO BE SIGNED BY PARENT/GUARDIAN OF SUBJECT MINOR

1. I, the signatory acknowledge, agree and understand that participation, including passive participation in this show may contain an element of risk of injury.
2. I the signatory acknowledge agree and understand that the risk warning at the top of this form constitutes a 'risk warning for the purposes of Division 5 of the Civil Liability Act 2002 (NSW)'.
3. I understand that by participating in this show _____ (name of minor) may become exposed to the risk of injury and I consent to the participation
4. I the signatory assert that the above named minor voluntarily consents to participation in this show
5. I the signatory acknowledge the risk referred to above and agree to waive any and all rights the above named minor, or any other person may have against the CHAS in relation to any loss or injury (including death) that is suffered by the above named minor as a result of participation in this show.
6. The signatory must continually indemnify the CHAS on a full indemnity basis against any claim or proceeding that is made, threatened or commenced, and any liability, loss including consequential loss, and loss of profits, damage or expense including legal costs on a full indemnity basis that CHAS incurs or suffers as a direct or indirect result of the above named minor's participation in any event held by the CHAS

I, _____ the parent/guardian of _____

Address _____

_____ Date of birth _____

Signature _____ Date _____