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2026 Congressional Art Competition

Student Information & Release Form

PLEASE TYPE. THIS INFORMATION IS USED FOR CERTIFICATES.
INCOMPLETE FORMS WILL NOT BE ACCEPTED.

MEMBER/DISTRICT INFORMATION	
MEMBER OF CONGRESS NAME:	STATE & DISTRICT:

STUDENT INFORMATION		
NAME:		GRADE:
STREET ADDRESS:		
CITY:	STATE:	ZIP:
MAILING ADDRESS (IF DIFFERENT):		
STUDENT EMAIL (PERSONAL):	STUDENT PHONE (CELL):	
PARENT OR GUARDIAN NAME(S):		
PARENT PHONE:	PARENT EMAIL:	

SCHOOL		
SCHOOL NAME:		
STREET ADDRESS:		
CITY:	STATE:	ZIP:
STUDENT EMAIL (SCHOOL):	ART TEACHER NAME:	
ART TEACHER PHONE:	ART TEACHER EMAIL:	

ART COMPETITION ENTRY
TITLE OF ENTRY:
MEDIUM:
DESCRIPTION: