Entry Form:

Name		
City	State	County
Phone	Email	
Age		
T'41 CF 4		
Vledium:		
I certify that this ar	t entry is original and	it represents my own work. I understand that by
•	•	ac Public Library permission to display, distribute,
•		erstand, the rules of the Bookmark Design Contest.
Contestant signature:		
Date:		
(For contestants under	· ·	
		o participate in the Bookmark Design Contest. I have
	he rules of the contest.	
Parent/Guardian signa	ature:	
Date:		
Daic	_	
	Desig	gn Template:
Design dimensi	O	s Digital entries of this size are also accepted.
8		~