KIDS ART CONTEST

Central Texas Medical Center invites children 2-18 to create artwork for a 2016 Calendar. This special keepsake calendar will celebrate healthy living by focusing on 8 great principles for living life to the fullest.

Pick a CREATION Health principle and create your masterpiece!

Choice
Rest
Environment
Activity
Trust
Interpersonal Relationships
Outlook
Nutrition

Art is due by September 18.

Contest Guidelines on back.

For questions, call CTMC’s CREATION Health desk at 512.753.3818 or visit ctmc.org.
CTMC CREATION Health Art Contest Entry/Parental Release Form

Contest Guidelines
• All entries must have a completed entry/parental release form attached.
• There are no limits on the number of entries per person.
• The Calendar Art Contest is divided into four age groups (Contestant age as of July 1, 2015).
  o Group 1: Ages 6 and Under
  o Group 2: Ages 7-10
  o Group 3: Ages 11-14
  o Group 4: Ages 15-18
• Entries can be made from any medium, including pastel, oil pastels, pen, pencil, charcoal, acrylics, watercolor, oils and mixed media.
• Entries should be the sole work of the contestant.
• All entries must relate to one of the words within our acronym CREATION.
  o Each letter in the word CREATION represents a principle. Each entry should represent what that word means to the contestant.
• All entries and forms are due by September 18, 2015.
• Drop off entries to the CREATION Health Institute Resource Center located in the main lobby of Central Texas Medical Center (CTMC), 1301 Wonder World Drive, San Marcos, TX, 78666. A CREATION Health Calendar Art Contest drop-off box will be clearly marked.

Prizes
• Each of the 8 CREATION Health principles will have up to 6 finalists for a total of 48 finalists. Twelve grand prize winners will be chosen among the 48 finalists. An additional 12 honorable mention pieces will also be recognized. Winning artwork will appear together in the 2016 CTMC CREATION Health Calendar, which will be distributed throughout Hays County and surrounding areas.
  o Our 12 grand prize winners will receive a $25 gift card, an award ribbon, a personal copy of the calendar and will have their artwork displayed as the centerpiece for one of the twelve months.
  o Each month will feature up to 3 finalist’s artwork pieces. Each of these winners will receive an award ribbon, a personal copy of the calendar and will have their artwork displayed next to the centerpiece artwork.
  o Each month will also feature 1 honorable mention. Each of these winners will receive an award ribbon, a personal copy of the calendar and will have their artwork displayed on the bottom portion of the calendar.
• All contestants and their families will be invited to the CREATION Health Artist Reception to be held in the fall at Central Texas Medical Center. Winners will receive a special postcard in the mail indicating their art is featured in the calendar. Placements will be announced at the reception.

Calendar Art Contest Categories
The CREATION Health principles are designed to help reach whole person health mentally, physically, spiritually and socially. Each letter in the word CREATION describes one of the eight principles that helps you live life to the fullest! For each entry please choose one of the eight CREATION Health principles: Choice, Rest, Environment, Activity, Trust, Interpersonal Relationships, Outlook or Nutrition. For more details and ideas visit www.ctmc.org.

Please use a clean white sheet of paper to create your artwork. Be sure to include the artist’s name, age and the letter you chose on each entry.

Artist Information
Artist First Name ______________________________________________ Last Name ________________________________________________
School/Art Teacher’s name __________________________________ School __________________________________________________
Age (as of July 1, 2015) __________________________ Gender __________

Circle the letter you choose to use: C R E A T I O N

Parent Contact Information
Contact First Name ___________________________________________ Last Name ________________________________________________
Mailing Address _____________________________________________ City, State, Zip __________________________ Phone Number________
E-mail Address _____________________________________________ Relationship to artist ___________________________

Parental Release Form
I, ____________________________________________, give ____________________________________________ (Please print name of parent/guardian) permission to enter his/her drawing in the CTMC CREATION Health Calendar Art Contest. I give Central Texas Medical Center (CTMC) permission to use the attached art and child’s name for CREATION Health Calendar Art Contest purposes, and I acknowledge and understand that the art will become the property of CTMC. I further grant permission to CTMC or its agents to use my child’s name and likeness in advertising, publicity and other media.

Parent/Guardian Signature ___________________________ Date ___________________________