



[www.projectsmlle.org](http://www.projectsmlle.org)  
508 634 0203

## Project Smile Coloring Book Drawing Contest

### Parent/Guardian Permission Form

Thank you for submitting your drawing for the Project Smile Coloring Book drawing contest. Project Smile is a nonprofit, dedicated to helping children who are victims of traumatic events. The winning submissions will be featured in our coloring book for children, by children. Winners will be invited to attend the coloring book debut at the Project Smile 14<sup>th</sup> Anniversary Celebration on Friday, October 20, The Crystal Room, Milford. Winners will receive complimentary admission and a complimentary coloring book.

**Child's Name:** \_\_\_\_\_

**Child's Age:** \_\_\_\_\_

#### Parent/Guardian Permission:

I hereby release my interests and my child/legal guardian's interest in the artwork submitted to Project Smile Inc. of Hopedale, MA. I waive any right to inspect or approve the finished version, including written copy that may be created and appear in connection therewith. I acknowledge that no payment has been made to me and I will not seek future compensation. I have read this release and am fully familiar with its contents. I am the parent or guardian of the minor named above and have the legal authority to execute this release. I approve the foregoing and waive any rights to the artwork submitted.

**Parent/Guardian's Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

