

# Peace, Love, Chalk Registration

Artist's name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Check Age Category: Junior (12-17) \_\_\_\_\_ Adult (18-up) \_\_\_\_\_

Artist Disclaimer\* I, the undersigned artist, acknowledge the following: The art I create must be suitable for general public viewing \* I give permission to the Hazleton Art League to photograph the art work and/or artist and use it for any advertising & publicity purposes \*Chalk & 38"x50" paper will be provided. No paints, liquid chalk, or fixatives can be used \* I will be courteous, friendly and helpful to fellow artists and members of the public • I release the Joe Maddon's Respect 90 Foundation & the Hazleton Art League, Hazleton Chamber of Commerce, all sponsors, organizations, and individuals involved in the Peace, Love & Chalk Festival from any liability, product or personal, for the duration of the event \* I will agree to follow the rules outlined in PLC Rules for 2022.

**\*All artists must be registered. All registrations must be received by September 7, 2022.**

*A \$10 late fee will apply to registrations received after the deadline.*

I have read the above and agree to abide by the Artist Disclaimer.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name\*\*: \_\_\_\_\_

\*\* If under 18, please have parent or guardian sign disclaimer above \*\*

Questions? Call Hazleton Art League 570-455-3333

Address to drop off OR mail forms: Hazleton Art League, 31 W. Broad St., Hazleton, PA 18201 \* \* \* \* \*

SIDEWALK SQUARE \_\_\_\_\_

SPONSOR \_\_\_\_\_

# Peace, Love, Chalk Release Form

I, \_\_\_\_\_ (printed name) hereby grant permission for the Hazleton Art League to use copies of the artwork that I created at Peace Love Chalk for any legal use, including but not limited to: fundraising purposes such as calendars, t-shirts, coffee cups, and/or for publicity, copyright purposes, illustration, advertising, and web content.

Furthermore, I understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

**Printed Name** \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Contact Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

Hazleton Art League 31 W. Broad Street Hazleton, PA 18201 570-455-3333

*hazletonsartleague.org*