

75TH ANNIVERSARY LOGO CONTEST ENTRY FORM

Contact Details – Artist #1		
Name:		
Address:		
City:	State:	ZIP Code:
Phone:		
E-mail:		
Are you a college student? If so, please compl	ete the fields below.	
College/University:		_ Class Standing:
Major/Academic Focus:		
Contact Details – Artist #2 (if applicable)		
Name:		
Address:		
City:		
Phone:		
E-mail:		
Are you a college student? If so, please compl		
College/University:		_ Class Standing:
Major/Academic Focus:		

<u>Logo Description</u>
Please describe the symbolism behind your logo design:
Required Signatures
By participating in The Midwest Clinic 75 th Anniversary Logo Design Contest, each entrant represents and warrants that s/he has read and agrees to be bound by the contest's official rules. Each entrant further understands that if her/his logo design is selected as the winner, s/he will relinquish all claims, rights (including any moral rights), and benefits related to the display, modification, reproduction, publication, distribution, use, and other exploitations of the work, other than the prize awarded to the winning entry.
This form must accompany all contest submissions.
Signature – Artist #1:
Date:
Signature – Artist #2:
Date:

Please send completed application and artwork to info@midwestclinic.org. Deadline for all submissions is May 15, 2020.