



Lynn Fitch
STATE TREASURER
COLLEGE SAVINGS MISSISSIPPI

College Savings Mississippi 2015 Art Contest

Applicant Information

Name: _____ Gender: _____ Age: _____

Grade: _____ School Name: _____

Mailing Address: _____

Email Address: _____

Phone Number: _____

I certify that I wish to participate in the 2015 College Savings Mississippi Art Contest and have obtained my parent's permission to participate. I also certify that the art work submitted is my original creation. I hereby grant full permission to College Savings Mississippi and affiliates to use any photographs, videotapes, website images, recordings or any other record of this event. I have carefully read the College Savings Mississippi Art Contest Official Rules and fully understand and agree to its contents. I am aware that this is a release of liability and a contract between myself and College Savings Mississippi, and that I sign it of my own free will.

Student Signature: _____ Date: _____



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Parent /Guardian Certification and Permission to Participate

I attest that the accompanied artwork is the work of my child, _____.
I give permission for him or her to participate in the 2015 College Savings
Mississippi Art Contest. I agree to all contest rules and guidelines.

I understand that all students must complete the entire application to be eligible to
participate in this contest. I have carefully read the College Savings Mississippi Art
Contest Official Rules and fully understand and agree to its contents. Students who
do not complete all components will not be considered a participant of the contest.
Students who are a recipient of a contest award will receive a scholarship in the
form of a Mississippi Affordable College Savings account.

Parent Signature: _____ Date: _____