

# Artist Application 2020 Calendar



**AUTISM SOCIETY**  
Improving the Lives of All Affected by Autism  
Inland Empire

Artist Name: \_\_\_\_\_

City: \_\_\_\_\_

Age: \_\_\_\_\_

3-5 sentences about the artist:

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Title (name) of Artwork:

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## Consent for Use of Artwork

I, \_\_\_\_\_ hereby authorize the **AUTISM SOCIETY**  
*artist's name*

**INLAND EMPIRE** & the **KVCR AUTISM INITIATIVE** to use the artwork to produce the 2020 calendar as a fundraiser and a promotional item to promote awareness about autism.

\_\_\_\_\_  
*artist/ and parent/guardian*

\_\_\_\_\_  
*date*

Please provide information below. **Print clearly**. Must include **PHONE NUMBER and EMAIL** if available. Information will not be released to the public.

Parent or Guardian \_\_\_\_\_

Address \_\_\_\_\_

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

By signing below, I hereby grant the ASIE & KVCR Autism Initiative permission as indicated above.

\_\_\_\_\_  
*signature*

\_\_\_\_\_  
*date*

**Please submit artwork via email to: [lvasquez@kvcr.org](mailto:lvasquez@kvcr.org)**  
**OR Mail to: KVCR**  
**Attn: Lillian Vasquez**  
**701 S. Mt. Vernon Avenue - San Bernardino, CA 92410**  
**The artwork will be returned to each artist.**

**Deadline to submit artwork:**  
**October 25, 2019**  
Please do not submit artwork that is copy written ie, Disney, Pokemon, etc.