



## Artwork Release Form

**By signing this release, I grant permission for my child's artwork in the "Happy 250<sup>th</sup> Birthday, America" activity to be considered for showcasing on Lewes Junction, at the Lewes Public Library. I understand that Art in Bloom, a committee of Lewes in Bloom, is organizing the event, and will determine the artwork that will appear on the Young Artist's Wall, and in other venues.**

**Child's Full Name:** \_\_\_\_\_ (Note: we will use the child's first name and last name initial only on any artwork that is chosen to be displayed or used in local news, marketing and/or social media.)

**Parent/Guardian Full Name:** \_\_\_\_\_

**Parent/Guardian Contact Information:**

- **Phone Number:** \_\_\_\_\_
- **Email Address:** \_\_\_\_\_

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

**Event:** Participation in Art in Bloom Activity "Happy 250th Birthday, America," at Lewes Junction

I, the undersigned, hereby grant permission to the Lewes Public Library and Art in Bloom to post my child's artwork for the purposes outlined below:

**1. Local News and Marketing:**

- I authorize the posting of my child's artwork on the Young Artist's Wall at Lewes Junction, in local news publications and marketing materials related to the Lewes Public Library and Art in Bloom.

## 2. Social Media Platforms:

- I grant permission to the Lewes Public Library and Art in Bloom to share reproductions of my child's artwork on social media platforms, including but not limited to Facebook, Instagram, and Twitter.

I understand that these reproductions may be used in a variety of formats, including print, digital, and online media, and will be visually accessible to the public.

I acknowledge that neither my child nor I will receive any compensation for the use of these reproductions.

By signing below, I confirm that I am the parent or legal guardian of the child named above and have the authority to grant this permission.

Thank you for your participation and support in promoting the arts and our community programs.

**Signature of Parent/Guardian:** \_\_\_\_\_

**Printed Name of Parent/Guardian:** \_\_\_\_\_

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

Please email this signed form along with the child's artwork to  
[artinbloomlewesde@gmail.com](mailto:artinbloomlewesde@gmail.com)