

**2022 Texas Mental Health Creative Arts Contest: Entry Form**

**Artist**

First Name:	Last Name:	
Address:	City:	ZIP:
Age Group: <input type="checkbox"/> Elementary School (PK–5) <input type="checkbox"/> Middle School (6–8) <input type="checkbox"/> High School (9–12) <input type="checkbox"/> Adult		
<i>If artist is an adult, please fill the fields below.</i>		
Email:	Primary Phone:	

**Parent/Guardian/Case Manager (if applicable)**

First Name:	Last Name:	
Address:	City:	ZIP:
Email:	Primary Phone:	
How should we display your entrant's name if he/she wins: <input type="checkbox"/> Name <input type="checkbox"/> Initials <input type="checkbox"/> Anonymous		

**Entry**

Title:
Type of Entry: <input type="checkbox"/> Original Artwork <input type="checkbox"/> Writing <input type="checkbox"/> Photography

**Release**

*This section must be signed to have winning work displayed and/or published.*

Please read the release and sign below.

1. By submitting the artwork, I am assigning all right, title and interest in the artwork to HHSC and HHSC may use and duplicate the artwork for any lawful purpose. HHSC shall be the exclusive owner(s) of the artwork giving them the right to, without limitation, in perpetuity throughout the universe, in any and all languages, in any and all media known or hereafter invented:(a) exhibit, broadcast, use, reproduce and license others to use as they see fit all or any part of the artwork; and (b) edit, dub, subtract from, add to or modify the artwork in any manner, combine it with any other material and/or incorporate it into other films, projects or programs, without any obligation of any kind to me whatsoever.
2. I represent that any music, images or other materials in the artwork (and my furnishing of pre-existing materials, if any) are original or in the public domain and will not to the best of my knowledge (i.e., what I know or should know after the exercise of reasonable prudence) infringe upon the rights of any third party. I represent and warrant that I have all rights and authority to enter into this release and to grant the rights granted herein.

**TEXAS Mental Health**  
**CREATIVE ARTS CONTEST**

3. As used in this release: (a) the term “Releasing Parties” means and refers to each of me, my heirs, next of kin, spouse, spousal equivalent, guardians, legal representatives, executors, administrators, successors and assigns; and (b) the term “Released Parties” means and refers to HHSC and each and all of its respective affiliated agencies, licensees, sponsors, successors and assigns, and the directors, officers, employees, agents, contractors, partners, shareholders, representatives and members of each of the foregoing entities.
  
4. I hereby voluntarily and knowingly, release, discharge and relinquish any and all claims, actions and lawsuits of any kind against the Released Parties related to or arising from my artwork, including, without limitation, the making, taping, production, use, editing, distribution, licensing, and/or promoting of the artwork or any portion thereof, including, without limitation, any claims, actions or lawsuits for wrongful death, negligence and/or other fault, either active or passive, personal injury, wrongful death, defamation, false light, violation of right of publicity, invasion of privacy, disclosure of embarrassing private facts, fraud, breach of contract, infringement of copyright, and negligent or intentional infliction of emotional distress.
  
5. I represent that I am at least 18 years of age, and that if I under 18 my parent or legal guardian has signed below.
  
6. I hereby agree not to assert any claim of any nature whatsoever against anyone relating to the exercise of the permissions granted hereunder.

<p><b>Signature</b>  <small style="color: red;">If artist is a student, a parent/guardian signature below is all that is required.</small></p>	<p><b>Date:</b></p>
<p><b>Parent/Guardian Signature</b></p>	<p><b>Date:</b></p>

<b>OFFICIAL USE</b>	Signature of HHSC Staff:	Date Received:
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