

Coloring Contest Release Form

For child's drawing to be considered for publication please ensure the following:

- **Child's drawing should be on a separate page from this release form**
- **Plain white paper in landscape layout with no print on the other side of the paper should be used**
- **Child's first name only is printed on the drawing**

County: _____

Child's Name: _____

Child's Age: _____

By signing this document, I acknowledge that my child's drawing is being entered in a contest that may be used in future publications with the Office of Child Support.

Parent/Guardian Signature: _____

Parent/Guardian Printed Name: _____

(Optional Information)

Mailing Address: _____

Email Address: _____

Phone Number: _____

SETS Number: _____