

Children's art show In celebration of National Child Day

How to enter

- 1. Choose one of the following themes:
 - Fall
 - Winter
 - Spring
 - Summer
 - Family
 - Rainbows

- Happiness
- Nature
- Animals
- Vancouver Island
- Travel
- Food
- 2. Print and complete the submission form. Remember to include a title for your artwork.
- 3. Create your themed artwork on 8.5" x 11" paper.
- 4. Once complete, mail your artwork and submission form by May 31, 2025, to:

Attn: Leanne Loster Children's Health Foundation of Vancouver Island 345 Wale Rd, Victoria, BC, V9B 6X2

Do not fold your artwork. Please include a cardboard insert to avoid the artwork being damaged or bent in transit. Write 'do not bend' on the envelope.

5. Have fun! You can submit up to three pieces of artwork with different themes but be sure that each piece is accompanied by a separate submission form.

Important

- Please note submitted artwork will not be returned.
- Please complete one application form for each submission.
- Selected artwork will be on display randomly at one of our facilities for a minimum of one week.
- Please submit your artwork by May 31, 2025.



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Submission form

Please complete, print, and mail this form with artwork to:

Attn: Leanne Loster Children's Health Foundation of Vancouver Island 345 Wale Rd, Victoria, BC

| V9B 6X2 | | |
|--|---|--|
| Artist's first name: | Artist's last name: | |
| Artist's age: | | |
| Parent/guardian's first name: | Last name: | |
| Title of artwork: | | |
| Themes: | | |
| Fall Winter Spring Summer Family Rainbows | HappinessNatureAnimalsVancouver IslandTravelFood | |
| School name (if applicable): | | |
| Contact email: | | |
| Contact telephone number: | | |
| Address: | | |
| City: | | |
| Postal code: | | |



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| How did you hear about the art show? | | | |
|---|---|---|---|
| I would like to receive correspondence | from the Foundation: | Yes: | No: |
| I authorize and give Children's Health Found child's submitted artwork for promotional of www.islandkidsfirst.com, and in one of the Foundation of Vancouver Island permission child's first name, age, title of piece, and the the property of Children's Health Foundation | and fundraising purposes of Foundation's facilities. I aut to display and/or publish in name of my child's home co | ind to display in thorize and give my child's submit ommunity. All art | an online gallery at Children's Health tted artwork with my work submitted become. |
| Parent/guardian's name: | Date: | | |