



St. Gabriel Communication, Ltd.
SIouxLAND CATHOLIC RADIO'S SECOND ANNUAL JURIED YOUTH ART FESTIVAL

Labels for Student Artwork

Please print legibly. Cut apart & affix to the backside of artwork. Duplicate as needed.

Student's Name: _____ **Grade:** _____

Parent's/Guardian's Names (Both please): _____

Parent's/Guardian's Phone and Email: _____

Artwork Title: _____ Medium: _____

Parish Name: _____ City: _____

Name of School: _____ Teacher's/Faith Formation Director's Name, Phone, & Email: _____

Student's Inspiration (2 sentences required if student's artwork is selected as a 1st Place Winner): _____

Student's Name: _____ **Grade:** _____

Parent's/Guardian's Names (Both please): _____

Parent's/Guardian's Phone and Email: _____

Artwork Title: _____ Medium: _____

Parish Name: _____ City: _____

Name of School: _____ Teacher's/Faith Formation Director's Name, Phone, & Email: _____

Student's Inspiration (2 sentences required if student's artwork is selected as a 1st Place Winner): _____

Student's Name: _____ **Grade:** _____

Parent's/Guardian's Names (Both please): _____

Parent's/Guardian's Phone and Email: _____

Artwork Title: _____ Medium: _____

Parish Name: _____ City: _____

Name of School: _____ Teacher's/Faith Formation Director's Name, Phone, & Email: _____

Student's Inspiration (2 sentences required if student's artwork is selected as a 1st Place Winner): _____