



## VINS en Plein Air Youth Artist Registration Form

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Name of School: \_\_\_\_\_

Parent/Guardian's Name(s): \_\_\_\_\_

Street Address: \_\_\_\_\_

Town/State/Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Parent's Mobile Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Parent's E-mail 1: \_\_\_\_\_ Parent's E-mail 2: \_\_\_\_\_

Are you or your family currently a VINS member?      Yes      No

How did you hear about VINS en Plein Air Painting Festival?

FRIEND/FAMILY    VINS WEBSITE    NEWSPAPER    FLYER    PLEIN AIR MAGAZINE  
SCHOOL    OTHER (PLEASE DESCRIBE) \_\_\_\_\_

### **VINS Release Statement**

I grant VINS and its 2018 en Plein Air partners (if applicable) permission to use photographs of my child participating in festival-related activities for publication in promotional materials, including but not limited to brochures, flyers, newspaper advertisements, social media, and the VINS/program partner's website.

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

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