



2012 INDIVIDUAL ARTIST RECOGNITION FORM

PLEASE PRINT CLEARLY

Artist's Full Name: _____

Artist's Address: _____

City Province Postal code

Phone Number: _____ Email: _____

RECOGNITION FOR AWARDS RECEIVED

Has won, placed second or third in a regional, provincial, national or international competition for their art (Literature, dance, drama, visual arts or music). **If submitting more than one achievement, please copy and attach a separate sheet where required. Provide all of the requested information for each award to be recognized.**

Name of Competition: _____

Competition Level: _____
(Regional, Provincial, etc.)

Location of Competition: _____ Date: _____

Award Received or Level Placed (1st, 2nd, or 3rd): _____

Category: _____

Name of Competition Organizing Body: _____

Competition Contact Name (for verification): _____ Phone Number: _____

RECOGNITION FOR NATIONAL ACCLAIM, SCHOLARSHIP OR ACCEPTANCE INTO A NATIONAL SCHOOL:

Type of Recognition / Acclaim: _____

Additional Information / Comments (Attach if necessary): _____

Submitted by: _____ Phone Number: _____

Please mail or fax to the Recreation Coordinator: The Cambridge Centre for the Arts, 60 Dickson Street, Cambridge, ON, N1R 8N1. PHONE: (519) 740-4681 ext.4565. FAX: (519) 624-0379



Deadline: August 31, 2012

Name of Competition			
Competition Level: <small>(Regional, Provincial, etc.)</small>			
Location:		Date:	
Award Received:			
Category			
Organization Body:			
Contact Name:		Phone Number:	
Name of Competition			
Competition Level: <small>(Regional, Provincial, etc.)</small>			
Location:		Date:	
Award Received:			
Category			
Organization Body:			
Contact Name:		Phone Number:	
Name of Competition			
Competition Level: <small>(Regional, Provincial, etc.)</small>			
Location:		Date:	
Award Received:			
Category			
Organization Body:			
Contact Name:		Phone Number:	