2020 YOUTH ART MONTH CELEBRATION
SARGENT ART SCHOOL PARTICIPATION GIFT FORM

School Name: ____________________________________________________________

School Telephone number: ________________________________________________

School Address: __________________________________________________________

Principal Name: __________________________________________________________

Principal Email: __________________________________________________________

1. __________ Number of students enrolled in your school
2. __________ Number of Art Teachers in your school
3. __________ Number of entries submitted to the state YAM Contest 2020

Please email this form directly to artcontest@sargentart.com

T: (570) 424 – 3596 ****** www.sargentart.com ****** F: (570) 459 - 1752