

# Registration Form

SALEM DAYS 2011



Return form or  
information to

Dale Boman  
daleboman@me.com

## SUBMITTER INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone number \_\_\_\_\_ Email address \_\_\_\_\_

## PAINTER INFORMATION

Name \_\_\_\_\_

Information (dates, residence, related to) \_\_\_\_\_

\_\_\_\_\_

PAINTING \_\_\_\_\_

Title and description \_\_\_\_\_

When painted \_\_\_\_\_

Size \_\_\_\_\_

Medium \_\_\_\_\_

## COPYRIGHT RELEASE:

☐ Copyright owner gives permission for painting to be published in 2012 Salem Calendar.

\_\_\_\_\_

☐ No copyright known

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