



YOUTH ART GALLERY

IDA Florida is eager to showcase the talents of young individuals with dyslexia and related learning disabilities in our IDA Florida Newsletter as well as at our 2018 Annual IDA Florida State Conference “Dyslexia: Dispelling Myths and Supplying Solutions.” Students from across Florida are invited to submit artwork to be featured in our IDA Florida Newsletter, IDA Florida Website, IDA Florida social media, and displayed in our Virtual Youth Art Gallery during our 2018 IDA Florida Conference.

BEGIN SUBMISSION

Participation Waiver and Release

In consideration for being permitted to participate in the Youth Art Gallery, I agree to assume any risks and to release and hold harmless The International Dyslexia Association - Florida Branch (IDA-FL), all Partner organizations, sponsor, volunteers, officials, communities, organization, and all other government or public entities (and their respective officers, agents, directors, employees, or members). I hereby grant my consent and permission to The International Dyslexia Association - Florida Branch (IDA-FL), all Partner organizations, sponsor, volunteers, officials, communities, organization, and all other government or public entities (and their respective officers, agents, directors, employees, or members) to use any and all information submitted in my application, and / or my name, art submission, photograph, videotape, motion picture recording, voice or likeness for any purpose, including conference publicity. I understand that my artwork will be considered a donation and IDA-FL has the right to put display it through various media. I have carefully read this Waiver and Release and fully understand its contents. If I am under 18 years of age at the time of registration, my parents or legal guardians have fully read, understand, and consented to the terms of this Waiver and Release and by signature(s) below authorize my participation.

Telephone(s): _____

Email Address(es): _____

Student Name: _____

Student Signature: _____

Parent/Guardian Name: _____

Parent/Guardian Signature(s) (IF student is under age 18): _____

Please submit this Waiver/Permission Form with Your Artwork in jpg or png format to:

Info.FL@dyslexiaida.org

Thank You!