

## CASTLE HILL ART SOCIETY INC.

presents the

# ORANGE BLOSSOM FESTIVAL 2024 ANNUAL CHILDREN'S ART AWARDS



## Castle Glen Community Centre, 157 Ridgecrop Drive, Castle Hill 2154

**Exhibition dates:** Opening Night Friday 20<sup>th</sup> September, 7pm for 7.30pm Exhibition – Saturday 21<sup>st</sup> September, 9am to 3.00pm

**Delivery of paintings**: Monday 16<sup>th</sup> September from 10.00am –11am and then 4pm – 5.30pm

**Collection of paintings:** Saturday 21st September 4pm - 5pm

Entry fee: Entry form and payment must be received no later than Saturday 7<sup>th</sup> September, 2024

\$4 per artwork (limit 2 paintings)

Payment: Payment can be made directly to our CHAS bank account

BSB: 082 155, A/c No. 509202262 - Please show reference **OBF** followed by Surname e.g. **OBF**SMITH. Entry forms can be left at Castle Glen or mailed, together with payment,

to 2/159 Ridgecrop Drive, Castle Hill 2154 if internet is not available.

#### SPECIAL CONDITIONS

- 1. Title, name and contact details must be on back of work.
- 2. Framed work must have a secure cord or hanging wire on the back with no protrusions.
- 3. The judge's decision is final.
- 4. All care taken but no responsibility for loss or damage.
- 5. Entries must be recent work of the participating artist.
- 6. **NB** Ages 5 11 years NO LARGER THAN 49 x 58 cms READY TO HANG Ages 12 18 years NO LARGER THAN 58 x 76 cms READY TO HANG 17 and 18 year old entrants must be full time school students.

#### PRESENTATION TO WINNERS ON OPENING NIGHT

**Sponsors: Rotary Club of Castle Hill** 

SchoolExpo.com.au Eckersley's Arts & Crafts

Please return this section completed by parent or in very legible writing by student. Enquiries 9899 3179

Age	Title of Work (Note: Max. 18 characters including spaces)	
5 – 8 years	1	
Painting	2	
9–11 years	1	
Painting	2	
12-14 years	1	
Painting	2	
15-18 years	1	
Painting	2	

	Name: I	Ph:	
	Address:	P/code:	
DECLARATION:			
understand that by signing this form I have read and agreed to both the Conditions of Entry and the Waiver.			
PR	INT NAME OF PARENT/GUARDIAN:	Date	
SIC	SNATURE OF PARENT/GUARDIAN:		

### PARTICIPANT'S INDEMNITY & WAIVER RISK WARNING

- 1. I acknowledge, agree, and understand that participation, including passive participation, in events and activities at this, or at any art show contains an element of risk of injury and I agree that my child may participate in this show.
- 2. I assert that my child is a minor who voluntarily consents to participation in this show.
- 3. I acknowledge, agree and understand that the risk warning at the top of this form constitutes a "risk warning" for the purposes of Division 5 of the Civil Liability Act 2002 (NSW).
- 4. I acknowledge the risk referred to above and agree to waive any and all rights that my child, myself or any other person claiming through me, may have against Castle Hill Art Society Inc. in relation to any loss or injury (including death) that is suffered as a result of participation in any event held by the Society.
- 5. I indemnify the Castle Hill Art Society Inc. on a full indemnity basis against any claim or proceeding that is made, threatened or commenced and any liability, loss (including consequential loss and loss of profits), damages or expense (including legal costs on a full indemnity basis) that the Castle Hill Art Society Inc. incurs or suffers, as a direct or indirect result of the Participant's participation in any event held by Castle Hill Art Society Inc.

I have made further enquiries which I feel are necessary or desirable and fully understand the risks involved in this activity.

I have read this Indemnity and Waiver form and acknowledge that by signing the Entry Form I agree to all terms and contents above.