## MFAH Glassell Junior School of Art 2025 OUTDOOR SKETCHING COMPETITION APPLICATION

Fill	Out	Completely	
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Student Name (First and Last)		Date of Birth (Month / Day / Year)
Age as of September 2025		Grade Level in Fall 2025
Street Address / Apt. # / City / State / Z	lip	
Parent/Guardian Name	Phone (Area Code and Number)	Email
School Attending in Fall 2025		School District
Currently enrolled in the Glassell Ju	nior School? □ Yes □ No	
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If yes, do you have a scholarship? [	]Yes □ No	

\*Student's completed sketch must accompany this form.