



If your child is participating in the 2025 National Healthy Homes Calendar Art Contest, please complete this form and return. Signed form must be included with the submission.

Name: (first name and last initial):

Age:

Grade:

Name of School:

Name and Phone Number of Teacher/Contact Person:

I understand that by submitting this art work for consideration for the OLHCHH 2025 National Healthy Homes Calendar Art Contest and that it may be used for marketing and outreach as needed OLHCHH marketing campaigns in print and online. I, _____, the original artist of this submission surrender all publish and reproduction rights to the art work for the purposes listed above including posting on the www.hud.gov/healthyhomes website.

(Printed Name and Signature of Parent or
Legal Guardian)

Date