

So You Think You Can Paint Canada 2010
STUDIO ENTRY FORM

Studio Name _____

Studio Owner(s) _____

Studio Address _____

Contact Person Name _____

Day Phone () _____

Email _____

Website _____

Signature _____ Date _____

By signing this form I agree to abide by all requirements of the competition and have the authority to do so.

CONTEST REQUIREMENTS:

1. My studio is an independently owned Paint Your Own Pottery Studio.
2. My studio is a Canadian operated studio with valid business licence.
3. My studio agrees to host a local competition and to submit a studio winner(s) to ChromaColour.
4. My studio agrees to allow ChromaColour to use the studio name in any promotion of So You Think You Can Paint Canada.
5. My studio agrees to meet all deadlines.

By signing and submitting the application form, my studio agrees to these requirements.

When completed, please fax this form to: (403) 250 7194