

UK Body Painting Festival 2008

Artist Application Form for Children

First Name _____

Last Name _____

Address 1 _____

Address 2 _____

City/Town _____

Post Code _____

Country _____

Website _____

Models Name _____

Category selected _____

Parent/Guardian Name _____

I give my permission for _____ to enter into this competition and accept full responsibility for this. Both of us accept that this work is allowed to be photographed, recorded and published.

Date

Parent/Guardian Signature

Please pay £20 **refundable** deposit
by PAYPAL to payments@ukbpf.com

or by cheque to:

BRITISH BODY PAINTING GUILD
1 IANS WALK
SEABROOK
HYTHE
KENT
CT21 5TS

www.ukbpf.com - info@ukbpf.com



PLEASE RETURN TO A EATWELL 1 IANS WALK SEABROOK HYTHE KENT CT21 5TS
or by email to info@ukbpf.com