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City of Lynchburg
Parks and Recreation Department
301 Grove Street
Lynchburg, VA 24501
www.LynchburgParksAndRec.com
(434) 455-5858

OFFICE USE ONLY

Permit No. _____

Date Received: _____

Receipt No. _____

PAINT THE PARK APPLICATION – DEADLINE 3/17/19

Artist Name: _____ **Email:** _____

Day Time Phone: _____ **EXT:** _____ **Cell:** _____

Address:

Street

City

State

Zip Code

Website (if applicable):

How did you hear about this event?

Describe size and location of your piece: If there is a particular section of the park you would like for your design please indicate the location here.

Artist Bio: (attach)

ENTRY:

Title (if applicable):

Design Image: (attach)

NOTE: Attachments to email submissions, attach as .WORD file or PDF. If submitting in-person, print off hard copy and attach to physical application.

GUIDELINES:

- When designing your artwork consider the following themes: Inclusion, Expression, and Progression
- Designs may not contain any business promotions or advertisements.
- Designs may not include any breach of intellectual property, brands or trademarks, or depictions of illegal activity.
- Designs must be public friendly with no vulgar or lewd language or representations.
- **If the final design differs greatly from the proposed design, the City of Lynchburg reserves the right to remove the artwork.**

TIMELINE:

Art submitted by March 17, 2019

For more information, please contact Megan Heatwole, Community Recreation Supervisor at (434) 455-5891 or email megan.heatwole@lynchburgva.gov

Winners announced in April 2019
Installation by May 1, 2019

LIABILITY & PUBLIC USE AGREEMENT:

Lynchburg Parks & Recreation will not be held responsible for any damage or loss. Lynchburg Parks & Recreation has the right to use images of any artwork submitted for display to help promote the event. Artist accreditation will be given when possible, but Lynchburg Parks & Recreation is not responsible for omissions in any publication.

I have read and understand the above statements. My signature below indicates I agree to the terms listed.

Applicant: _____ **Date:** _____

Signature of Applicant: _____

The Lynchburg Parks and Recreation Department complies with the Americans with Disabilities Act for qualified individuals. If reasonable accommodation is needed, please tell us upon registering and at least ten days prior to the event.