2024 BGCA National Arts Contest Naval Air Station Sigonella

Youth Name:	Youth Age (Age when	artwork was created):
Parent Name:	Parent Email:	
Parent Number:	_	
If currently enrolled in any of the fo	llowing programs, please	e select all that apply:
CYP Youth Sports CYP	Youth Complex / Teens	CYP School Age Care (Hourly/Camp)
DODEA Elementary School	DODEA Middle/High Scho	ool
My youth is not registered in any	of the above programs	
Statements of Understanding, pleas	e initial each statement:	
must have a current Registration Pac	cket with Child and Youth	r work submitted to the National Level, I Programs (Registration Form, Health ion Statements) by 26 February 2024 .
		r work submitted to the National Level, my n BGCA and associated with NAS Sigonella
		at NAS Sigonella and does not complete will not be submitted to the national level.
I understand the following work -Art Kits, Ready-made patter materials (e.g., songs, films, or any o	ns, tracings, follow-the-d	ots, cartoon characters, and copyrighted

Youth may submit works with one of the following Categories:

isual Arts
Drawing
Painting
Sculpture
Pastel