



2931 Mission Street | Santa Cruz, California 95060 | Tel: 831.454.9455 | Fax: 831.469.3712 | www.hacosantacruz.org
Also serving Hollister and San Juan Bautista | Tel: 831.637.0287

Children and Youth Poster Art Application and Permission

Name of Applicant (artist): _____

Age Category: ___ Preschool, ___ K to 5th Grade, ___ 6th – 8th Grade, ___ 9th – 12+ Grade

Please describe the career you want: _____

What inspired you to design this poster art:

Name of Parent or Guardian: _____

Address: _____

City, State, and Zip Code: _____

Phone and Cell Phone: _____

Applicant and parent or guardian understand and agree that upon submission of the applicant's poster, it will become the property of the Housing Authority of the County of Santa Cruz (The Housing Authority). The Housing Authority shall have exclusive and full rights to display, copy and reproduce copies of the poster and may retain the original. The applicant, and parent or guardian, hereby release and discharged the Housing Authority from any and all liabilities, claims, or actions, including without limitation any claim to payment of compensation in connection with the Housing Authority possession, use, copying, reproduction and/ or distribution of the poster.

By signing this application below, applicant, and any parent or guardian signing on applicant's behalf hereby indicate agreement to the conditions stated above. A person signing as guardian further represents that he or she is fully and lawfully empowered to as act guardian for the applicant. This consent is given in perpetuity, and does not require prior approval.

Signature of Applicant (artist): _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____