

The Cultural Arts Show is right around the corner and preparations are underway for another great event. Please consider submitting your resident's work of art in this year's Cultural Arts Show. Below you will find the pre-registration form which is to be completed and mailed in. The Conference Registration form should be kept and attached to the entry when it is brought to conference. Please make copies of this form as needed, as only one form is to be used per entry. **Long term care facilities should copy both**

registration forms on white paper and all other facilities should copy both forms on blue paper. Pre-Registration forms must be received by Thursday, September 1. Please call if you have any questions. The Cultural Arts Committee is in need of assistance at Conference with the registration and display of entries. If you are attending conference and are interested in helping, please contact Sue at 608-752-6709.

Bringing culture to Madison!

The Cultural Arts Show is open to WRAP MEMBERS ONLY!

To enter the Cultural Arts Show, Entries must be PRE-REGISTERED

Pre-registration form MUST BE RETURNED BY Thursday, September 1, 2011

NO LATE ENTRIES WILL BE ACCEPTED

Return forms to: Susan Tucker-Pann
St. Elizabeth Home
109 S. Atwood Ave.
Janesville, WI 53545

Conference Registration Form

This portion **MUST** be completed and attached to each exhibit when brought to conference.

Project done by _____ Group _____ Individual

Name of Resident: _____

Address: _____

City: _____ Zip: _____

Facility: _____

(circle one) Assisted Living CBRF Long Term Residential

WRAP Member: _____

Category: _____

Description: _____

Percentage of project completed independently: _____ %

WRAP CULTURAL ARTS PRE-REGISTRATION FORM

To enter the Cultural Arts Show, entries must be pre-registered.

Each resident may enter as many categories as he/she chooses, but ONLY ONE entry per category.

PLEASE PRINT CLEARLY THE RESIDENT'S NAME AS IT SHOULD APPEAR ON CERTIFICATE

NAME OF RESIDENT/GROUP: _____

NAME OF FACILITY: _____

TYPE OF FACILITY: (circle one) ASSISTED LIVING CBRF LONG TERM RESIDENTIAL

ADDRESS: _____

CITY: _____ ZIP: _____

WRAP MEMBER NAME: _____ PHONE: _____

CHECK CATEGORY:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Artwork | <input type="checkbox"/> Knitting | <input type="checkbox"/> Prose* | <input type="checkbox"/> Stamping/ Stenciling |
| <input type="checkbox"/> Computer Generated | <input type="checkbox"/> Needlework | <input type="checkbox"/> Quilting | <input type="checkbox"/> Weaving |
| <input type="checkbox"/> Crocheting | <input type="checkbox"/> Painted Object | <input type="checkbox"/> Recycled Craft | <input type="checkbox"/> Woodworking |
| <input type="checkbox"/> Garden Art | <input type="checkbox"/> Paper Crafts | <input type="checkbox"/> Scrapbook | <i>Please Circle: Original or Kit</i> |
| <input type="checkbox"/> Holiday Crafts | <input type="checkbox"/> Photography (matted) | <input type="checkbox"/> Sewing | |
| <input type="checkbox"/> Jewelry/ Beadwork | <input type="checkbox"/> Poem* | <input type="checkbox"/> Short Story (<3000 words) | <input type="checkbox"/> Other |

DESCRIPTION OF ENTRY: _____

PERCENTAGE OF RESIDENT PARTICIPATION: _____ % Comments _____

*****ALL ENTRIES NEED TO BE ACCOMPANIED BY A REGISTRATION FORM***** (located at the top of this page)

Each entry will be judged individually, on its own merit, and must have been completed within the last year.

Entries are judged on appearance, workmanship, design, originality, color, harmony, and percentage of resident participation.

"BEST OF SHOW" Awards will be chosen from the first place winners.

*Poem: A piece of writing which has rhythm and rhyme.

*Prose: The ordinary form of language without rhyme or meter.

Cultural Arts Registration hours will coincide with Conference Registration hours.