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Parent/Guardian/Teacher Name: \_\_\_\_\_  
Student Name: \_\_\_\_\_ Student Age: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_

By signing below, I acknowledge that I am a parent or legal guardian of the entrant and hereby give my permission for him/her to enter the National Bobblehead Hall of Fame and Museum Mascot Contest Presented by Olympus Group. I have read and accept the Official Contest Rules located at [www.bobbleheadhall.com/mascot/rules](http://www.bobbleheadhall.com/mascot/rules) and acknowledge that the National Bobblehead Hall of Fame and Museum's Privacy Policy located at [www.bobbleheadhall.com/privacy-policy](http://www.bobbleheadhall.com/privacy-policy) applies.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



National Bobblehead Hall of Fame and Museum Mascot Design Contest Presented by:

