2016 YOU(th) Decide

ART CONTEST INFORMATION

NYS youth between the ages of 12 and 17 are invited to participate in an art contest to help correct the myths some youth hold about gambling and help spread the truth about gambling.

Eligibility: Anyone between the ages of 12 and 17, living in New York State, may participate.

Theme: Art work should focus on revealing one of the following truths about gambling:

- Good luck charms play no part in winning or losing.
- Most people who gamble lose.
- Gambling can become an addiction.
- Gambling comes with no guarantees.
- Underage gambling is not safe.

Materials and Requirements: Art work must be your own original work. Copyrighted characters (such as Superman) or copyrighted clip art, logos, etc., will not be accepted. Artists may use any materials to create their message. Art work is not limited to posters; please be creative. A completed entry/release form MUST be attached to the back of all entries or they will not be included in the contest.

Deadlines: The contest will run through May 25, 2016. Please contact NCADD-RA with any questions. Entries can be dropped off at your local YOU(th) Decide participating provider:

National Council on Alcoholism and Drug Dependence-Rochester Area

1931 Buffalo Road, Rochester, NY 14624 (email jfaringer@depaul.org OR call (585) 719-3480)

Judging: Judging will be based on three criteria:

- Does the art work reveal one of the listed truths about gambling?
- Is the message clear?
- Is the art work creative and original?

The participating provider in each county will choose a first, second, and third place from the submitted art work. All New York statewide selected pieces of art will, then, be voted on by the New York Council on Problem Gambling for statewide first, second, and third place pieces.

Winning: The three winning pieces of artwork will be presented at the National Conference on Problem Gambling in July, 2016.

******This form MUST be attached to the back of your submission using only tape ******

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ART CONTEST *RELEASE FORM*

Youth Name:	
	(Please Print Clearly)
Home Address:	
City, State, Zip Code:	
*COUNTY of Residence	:
Youth's Home Phone N	lumber:
Participating Preventio	n Provider:

I HEREBY CERTIFY THAT THIS POSTER WAS CREATED ENTIRELY BY THE YOUTH NAMED ABOVE AND IS THE YOUTH'S ORIGINAL ARTWORK. I AGREE THAT IT MAY BE OFFERED FOR PUBLIC DISPLAY OR PUBLICATION AT SOME TIME DURING OR AFTER THE CONTEST. I UNDERSTAND THAT THIS POSTER BECOMES THE PROPERTY OF THE NEW YORK COUNCIL ON PROBLEM GAMBLING AND MAY BE REPRODUCED. THE ONLY INFORMATION THAT WILL BE RELEASED IS THE STUDENT'S NAME, AGE, AND HOMETOWN.

STUDENT Signature	PARENT/GUARDIAN Signature
Printed Name	Printed Name
Date	Date

****This form MUST be included with your submission****