

***IKE PARKER MEMORIAL FINE ARTS SHOW 2026***

**ENTRY FORM**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Email \_\_\_\_\_

**Division**

\_\_\_\_ Professional (\$10 each)      \_\_\_\_ Amateur (\$10 each)      \_\_\_\_ High School (\$5 each)

Fill out Lines for Each (Limit 4)

Entry #1 Title: \_\_\_\_\_

Medium \_\_\_\_\_

Entry #2 Title: \_\_\_\_\_

Medium \_\_\_\_\_

Entry #3 Title: \_\_\_\_\_

Medium \_\_\_\_\_

Entry #4 Title: \_\_\_\_\_

Medium \_\_\_\_\_

Entry #1 Artist _____ Title _____ Category _____ Division _____	Entry #1 Artist _____ Title _____ Category _____ Division _____
Entry #1 Artist _____ Title _____ Category _____ Division _____	Entry #1 Artist _____ Title _____ Category _____ Division _____

