BELLPORT MIDDLE SCHOOL

"Make Your Mark"
Proposal Form

Name(s):_____

Lead Artist (if applicable): _____

If one or more individuals are participating, please include the name of a lead artist. The lead artist will be contacted for information and updates.

You are a:

Student Staff Member Community Member BMS Alumnus

Date of Submission: _____

Email: _____

Phone #: ( ) - ____ - _____

Where do you propose the mural be located?

☐ East Café ☐ Above lockers

☐ West Gymnasium ☐ Ceiling Tile

☐ East Gymnasium ☐ Stairwell

How large will it be? Please provide dimensions: _____

In which medium will you be working? _____

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What will the mural look like? Describe it and include a colored sketch (you may use this space or a separate piece of paper):

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Which value does your mural align with?

Safe Respectful Responsible

What is the intended purpose for this mural to be created? In what way does it benefit the Bellport Middle School community?

_____
_____
_____
_____
_____

By signing this document, I agree to support Bellport Middle School's Community Service Project "Make Your Mark" to the specifications above. I understand that the project is set on a rotation and that my artwork will not be permanent. Once all designated mural space is filled the oldest murals will be photographed, painted over and the space will be given to a new artist. I further understand that by submitting this proposal it does not guarantee that my design will be selected for the mural project. I have attached a sketch of my mural. I acknowledge the South Country Code of Conduct as well as New York State Law; my art piece contains no images, which infringe on these statutes, and my mural will not deviate from the approved sketch. I understand Bellport Middle School does not give legal copyright to any public artist.

Once you have read through and understand the above statement, please sign below:

Signed: _____ Date: _____

Parent/Guardian Signature: _____

For office use only:

Signature of approval: _____ Date: _____

Project start date: _____