



# 2017 ALL SMILES Art Contest Attleboro Arts Museum

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*Omar Salem* | DMD, MS  
Orthodontics for Children and Adults

**Calling All Youth Artists ages 5 – 17!**

**Deadline for entries is Sat., April 29th by 5pm**

ALL SMILES is a free Attleboro Arts Museum Art Contest open to artists ages 5 – 17

**THEME:**

SHOW US YOUR TEETH! All artworks must represent either a student's favorite Laugh-Out-Loud moment from his/her personal experience or invoke a Laugh-Out-Loud moment from the viewer.

**ELIGIBILITY:**

- All Smiles Art Contest is open to all artists ages 5 – 17
- Contest age divisions are 5 – 8, 9 – 13 and 14 – 17

**PARTICIPATION GUIDELINES:**

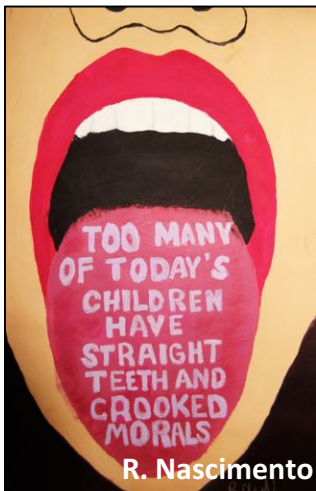
- There is **no** fee to enter
- Up to **2** artworks per artist may be submitted
- Artwork entries must be no larger than **18 inches by 24 inches**.
- Entries must be **less than** ¼ inch thick.
- Entries **may** be multi-color, black and white, or a single color.
- Open to all **two-dimensional** art mediums that may include, but not be limited to drawing, photography, illustration, painting, scratchboard, printmaking, collage, etc.
- All entries must be the artist's **original**, hand-drawn creation and may not be traced or copied from photographs or other artists' works.
- Artists are encouraged to create a **new** work of art for this art contest or choose an appropriate artwork from their portfolio. Artworks must have been created in the **last year, 2016 – present**.

**4 PRIZES!**  
each receive a  
scholarship to an  
Attleboro Arts Museum  
2017 summer  
art week or class!

- Artworks that have been **previously exhibited** at the Attleboro Arts Museum will not be considered.

**HOW TO SUBMIT:**

- Deadline for submissions is **Saturday, April 29th by 5pm.**
- Entries may be emailed to [arovaldi@attleboroartsmuseum.org](mailto:arovaldi@attleboroartsmuseum.org), subject line “All Smiles Art Contest” OR hand-delivered to the Attleboro Arts Museum, 86 Park Street, Attleboro, MA 02703.
- **No submissions of original artwork please.** If emailing, please provide an accurate digital (JPEG) image of the submitted artwork(s). If hand-delivering, please provide accurate photo-copies of the submitted artwork(s). Due to high volume we are unable to return your printed samples.
- All submissions must be entered with an **All Smiles Art Contest Submission Form (page 4 of this packet).** Your entry is not complete without the inclusion of this submission form.



**ALL SMILES ART CONTEST TIMELINE:**

- **Saturday, April 29th by 5pm** – Artwork Submissions Deadline
- **May 2017** – Notification of Winners. Winners will be announced on the Museum’s website at [www.attleboroartsmuseum.org](http://www.attleboroartsmuseum.org) by no later than May 26th, 2017. No calls please – thank you! All artists that submitted artwork will be recognized on the Museum’s website.
- **Friday, June 2nd or Saturday, June 3rd; 10am-4pm** – Drop-off Original Winning Artworks at the Museum.
- **Saturday, August 26th from 6 – 7:30pm** – Exhibition of Winning Artworks. This exhibition will be showcased during the Attleboro Arts Museum’s end of summer event called, *Arts Night at the Museum*. A presentation of awards by a representative of Salem Orthodontics will take place at 6:30pm. All are invited to attend this free presentation.
- **Tuesday, Aug 29th; 10am-4pm** – Pick up of Original Winning Artworks. Artists may also pick up their artwork(s) at the end of the night on Aug 26th. The Museum will not be responsible for artworks that are not picked up by the final pick up date of Tues, Aug 29th at 4pm.

**JUDGING CRITERIA:**

A panel of judges that include local working artists and art educators will select the winning artworks. The artworks will be judged on personal expression, imagination, creativity, individuality and how well the piece relates to the All Smiles theme.

**AWARDS (14 Total):**

- Best in Show Overall (Ages 5 – 17)
- Best Laugh-Out-Loud Artwork
- Ages 5 – 8:  
First Place, Second Place, Third Place and Honorable Mention
- Ages 9 – 13:  
First Place, Second Place, Third Place and Honorable Mention
- Ages 14 – 17:  
First Place, Second Place, Third Place and Honorable Mention

All Attleboro Arts Museum All Smiles Art Contest winners will receive a Certificate of Recognition and will take home a special package of “All Smiles” gifts from Salem Orthodontics.

Salem Orthodontics recognizes the importance of arts for our youth and directly supports creative learning opportunities that allow students to voice their creativity and comment on their culture. Please like Salem Orthodontics on Facebook or follow on Instagram @saalemorthodontics.

**PRIZES:**

Four full-day summer art week/class scholarships for 2017 (a \$250 value each) will be given to the following award categories:

- Best in Show Overall Ages 5 – 17
- First Place Ages 5 – 8
- First Place Ages 9 – 13
- First Place Ages 14 – 17.

*All Smiles scholarships must be redeemed during the Museum’s 2017 Summer session. There are no exceptions. If a scholarship prize is not redeemed during our 2017 summer session, it cannot be used for future art class sessions. Please contact the Museum if you have any questions.*

**MUSEUM CONTACT:**

Abby Rovaldi

Programs Coordinator

Attleboro Arts Museum

508.222.2644 x15

[arovaldi@attleboroartsmuseum.org](mailto:arovaldi@attleboroartsmuseum.org)

[www.attleboroartsmuseum.org](http://www.attleboroartsmuseum.org)

## 2017 ALL SMILES Art Contest Submission Form – Due Sat., April 29th by 5pm

There is **no fee** to enter the All Smiles Art Contest at the Attleboro Arts Museum.

All information is required for processing. (PLEASE PRINT):

Artist Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Home Phone # (with area code): \_\_\_\_\_ Cell Phone # (with area code): \_\_\_\_\_

Email: \_\_\_\_\_

How did you hear about the All Smiles Art Contest? \_\_\_\_\_

What school does the artist attend? \_\_\_\_\_

Can we list the artist's first and last name on the Museum's website? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you a Museum member? \_\_\_\_\_ Yes \_\_\_\_\_ No

### Artwork Entry Information (PLEASE PRINT):

Title of Artwork #1: \_\_\_\_\_

Materials Used: \_\_\_\_\_ Size (h x w): \_\_\_\_\_ Year Created: \_\_\_\_\_

Title of Artwork #2: \_\_\_\_\_

Materials Used: \_\_\_\_\_ Size (h x w): \_\_\_\_\_ Year Created: \_\_\_\_\_

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**X ARTIST SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**X PARENT/GUARDIAN SINGATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_