CALLING ALL ARTISTS









The Art of Autism

What is Autism to you?

Drawings • Paintings • Photography • 3-D Art



Artwork displayed at the second annual

AUTISM SUMMIT: THE ART OF AUTISM

November 3 • Akron Civic Theatre 182 S Main Street, Akron, OH 44308 5:00 PM VIP Reception • 6:30 PM Program

- Entries are an Expression of Autism Based on the Artist's Perspective
- Limit of One Entry Per Individual or Group
- Open to Classes, Family Members, Individuals with Autism of All Ages
- Prizes Awarded, Top 8 included in Autism Awareness Note Card Set

DEADLINE FOR ENTRIES: OCTOBER 24, 2016

Information and Guidelines at AutismAkron.org

Sponsored By:







WORKSHOP SPONSORS Akron Children's Hospital



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attorneys at law



OMNOVA Solutions Department of Job and Family Services United Disability Services

THE ART OF AUTISM

Presented by: Autism Society of Greater Akron



ARTWORK SUBMISSION GUIDELINES FOR DISPLAY

Thursday, November 3 • Akron Civic Theatre 182 S. Main Street, Akron, OH 44308 5:00 PM VIP Reception • 6:30 Program

The *Autism Summit* strives to nurture and help create an autism friendly environment by sharing the autism journey with our community. On November 3, at the Akron Civic Theater, we invite you to take part in an evening showcasing "The Art of Autism." Attendees will enjoy an artwork display, live performances, and a screening of the documentary film, "Life, Animated." Consider submitting artwork created by an individual, family, classroom, or group that expresses or communicates a message of emotion, uniqueness, community, and acceptance of autism.

ELIGIBILITY

- Individual or group, including classes, family members, individuals with autism.
- Art must be an expression of autism based on the artists' perspective.
- Open to all ages. Limit of one entry per individual or group.
- Biography and description of the piece telling why/how it is an interpretation of autism is required.
- Limited number of submissions accepted.
- Submissions will be on display at the Akron Civic Theatre on Thursday, November 3.

MEDIA CATEGORIES

Art must fit into one of these media categories: Painting, Drawing, Photography, 3-D Size of artwork must not exceed 24" x 36".

SUBMISSION

Submissions must be received by **Monday, October 24, 2016**. A photograph of the artwork must be submitted with the completed entry form.

DROP OFF / PICK UP OF ARTWORK

Artwork must be **set up between 12 - 2pm on Thursday, November 3** at the Akron Civic Theatre. Artist is responsible for providing all necessary materials for art display such as easel or pedestal. Works must remain on exhibit for the duration of the program and **MUST be picked up immediately following its conclusion**. ASGA is not responsible for any art forgotten at the event.

SALE OF ARTWORK

Artwork will not be "sold" on November 3. If you are making your artwork available for sale, please indicate so on the submission form. ASGA will provide your contact information to interested parties.

NOTE CARDS

During the November 3 VIP Reception, attendees will choose the top 8 submissions to be included in an Autism Awareness Note Card Set that will be offered for sale with all proceeds benefiting the Autism Society of Greater Akron. Credit will be attributed to artists with no royalties paid.

LIABILITY

ASGA does not provide insurance for artwork at this event. It is up to the student's guardians to seek insurance for loss or damage as they deem fit.

SEND SUBMISSION FORM & IMAGE OF ARTWORK BY OCT 24 TO:

Email: info@autismakron.org

Mail: Autism Society of Greater Akron, 701 S. Main Street, Akron OH 44311

THE ART OF AUTISM

Presented by: Autism Society of Greater Akron



ARTWORK SUBMISSION FORM

ARTIST INFORMATION

Name of Artist: _						
Age:	School (if applicable):					
If under 18, Paren	t or Guardian's Nar	ne:				
Mailing Address:						
City:		_State:	Zip:		Phone:	
Email:						
	•	or group. Art	ist is respon	sible for se	tting up and tearing d	own the
Title of Piece:						
Media (choose on	e): 🗖 Painting	□ Drawin	g 🗖 Pho	otography	☐ 3-D Art	
Briefly describe yo	urself and your co	nnection to au	tism (display	yed with yo	ur art). PRINT CLEARI	_Y.
Briefly describe yo	ur work of art and	why or how it	is an interp	retation of	autism. PRINT CLEAR	LY.
PHOTOGRAPH OF accept or reject an		e included witi	h this submi	ssion form.	ASGA reserves the rig	nht to
ARTWORK DISPL	AY TERMS & CO	NDITIONS				
included in an Aut Society of Greater	ism Awareness No	te Card Set that be given to m	at will be sol	d with all p	nd that my submission roceeds benefiting the royalties. ASGA is not	-
☐ I would like my	contact information	on provided to	interested	parties wish	ning to purchase my a	rt.
_	or my artwork to be printed notecards				ork description to be swebsite.	