



LEGOTM Contest

July 25, 2015

12:30-3:30 PM

Child's Name: _____

Parent or Guardian's name: _____

Mailing Address: _____

Contact Phone Number: () _____

Contact E-mail Address: _____

I hereby give my consent for the child named above to enter the LEGOTM contest on Saturday, July 25, 2015, from 12:30pm until 3:30pm, at the George C. Marshall Museum, VMI Parade, Lexington, VA.

By completing and signing this form I, the undersigned, certify that I have read and agree to all contest terms and conditions. (www.marshallfoundation.org/newsroom/events/lego-contest-winged-warriors/)

Participation in the event assumes consent for photographs to be used for museum purposes only.

Parent or Guardian's Signature: _____

Date: _____

All registration forms must be accompanied by the \$5.00 per child registration fee and are due upon arrival at the Museum for the contest.

George C. Marshall Museum