

## **Sri Lankan Association of Geriatric Medicine**

**Application Form: All Island School Art competition 2025** 

1. Full name of the contestant (which should be mentioned on the certificate):

| <ol> <li>Date of Birth and the age of the contestant:</li> <li>Grade:</li> <li>Contact number (two numbers are preferable):</li> <li>Details of the school         <ul> <li>Name:</li> <li>Address:</li> <li>Contact details (Telephone/ Email):</li> </ul> </li> <li>Please select the relevant category for art competition:</li> </ol> |  |
|---|--|
| Category 1 - Grade 6,7,8  |  |
| <b>Category 2 -</b> Grade 9,10,11   |  |
| Consent from parent/guardian  Name of the parent/guardian:  Telephone number:  I hereby give consent for my child to participate in this competition.   |  |
| Signature of the parent/ guardian   |  |
| Certification from school principal   |  |
| hereby certify that this painting/video is contestant's own work.   |  |
| Signature and name of the principal with official stamp   |  |
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## Rules and Regulations of the Art Competition

- Students from grade 6 to 11 are eligible.
- One contestant can submit only one painting.
- Paintings should be done in A3 size paper using any medium (pastel, water colours etc).
- Paintings should not be framed.
- Paintings should be certified as his or her own work by the principal.
- The following should be mentioned on the top left corner of the envelope,
  - o Name
  - Grade
  - Category (1/2)
- All paintings should be handed over or sent by post to the

## Sri Lanka Association of Geriatric Medicine, , Wijerama House, Wijerama Mawatha, Colombo 7, on or before 30th May 2025.

- All paintings should be sent with the completed application given below.
- The decision taken by the judges will be the final decision.

The selected paintings will be used for the publications of Sri Lanka Association of Geriatric Medicine

Please note that children of members of Sri Lanka Association of Geriatric Medicine are not eligible to participate in these competitions.