



CREATIVE CARTOONING

SENIOR POSTER FORM

NAME:

NICKNAME:

DISTINCTIVE FEATURES:

STATURE/BUILD:

HAIR STYLE/COLOR:

SCHOOL NAME:

SCHOOL ACTIVITIES:

AWARDS/ACCOMPLISHMENTS:

FRIENDS YOU WOULD LIKE TO BE SHOWN WITH IN POSTER:

HOW WOULD YOU LIKE TO BE DEPICTED:

LAST WORD: (THIS IS OPTIONAL AND TO BE 10 WORDS MAX.)

(LAST WORD MAY BE OMITTED AT THE DISCRETION OF THE ARTIST)

CONTACT INFORMATION

ADDRESS:

EMAIL:

PHONE NUMBER:

THE ARTIST RESERVES THE RIGHT TO DEPICT "YOUR IMAGE" IN A CREATIVE MANNER USING ANY OR ALL OF THE ABOVE INFORMATION