



*Tuggerah Lakes Art Society Inc.*

ABN 81 282 237 158

PO Box 4288 BAY VILLAGE NSW 2261

[www.carnevale.org.au](http://www.carnevale.org.au)

**PRESENTS**

# **CARNEVALE 2018**

**Join the fun and take part in**

## **THE MASK PROJECT**

**FOR INFANTS & PRIMARY SCHOOL STUDENTS**



***Entries are free! Great Prizes & Trophies***

**Dates:** 3<sup>rd</sup> to 31<sup>st</sup> August 2018

**Location:** The Art House, Margaret St., Wyong 2259

**Open daily** from 10.00am to 5.00pm

**Launch & Announcement of Prize winners:**

**During the ARTISANS MARKET Saturday 4<sup>th</sup> August 2018 11.00am**

### **WHAT TO DO:**

- Buy or make a mask.
- Choose any medium.
- Create a colourful, amazing mask.
- For exhibition purposes, mount on a canvas or have the mask strung.
- Cash Prizes, vouchers and trophies will be awarded to the winners.



### **DATES TO REMEMBER:**

**Entry Forms Due: 28<sup>th</sup> June 2018**

**Mail to:** The Carnevale Coordinator, PO Box 4288, Bay Village, 2261

**Receiving Day: 1<sup>st</sup> August 2018**

**Deliver to:** The loading dock behind The Art House, Margaret St., Wyong 2259  
between 9am & 12pm

**Collection Day: Friday 31<sup>st</sup> August 2018**

**Collect from:** The front door Box Office, The Art House, Wyong

**Time:** Between 10 to 5pm

### **For further information contact:**

Troy Flight, Carnevale Coordinator

Email: [info@carnevale.org.au](mailto:info@carnevale.org.au)

Tel: 02 43908194 Mob: 0425 205 849



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## **THE MASK PROJECT**

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### **Please Complete Entry Form**

**Mail to: The Carnevale Coordinator, PO Box 4288, Bay Village 2261**

**To arrive on or before 28<sup>th</sup> June 2018**

**ONE ENTRY PER PERSON**

First Name: ..... Last Name: .....

Address: .....

..... Postcode: .....

Age: ..... School: ..... Class: .....

Tell us about your Mask .....

.....

.....

#### **Parent Consent Form**

I give permission for my child .....  
to participate in the The Tuggerah Lakes Art Society's Mask Project.

Name: (Parent/Guardian) ..... (Please Print)

Tel:..... Mob: .....

Signature (Parent/Guardian)..... Date: .....

#### **For further information contact:**

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