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# State Level Art Competition for Special Needs Children and Adults

Rotary Club of Bandar Utama

## Rainbow In My Heart Art Competition 2013



Art Competition Theme: **Paint Your Life**

Venue: **SEGI University College, No. 9, Jalan Teknologi,  
Kota Damansara, PJU 5, 47810 Petaling Jaya.**

Date & Time: **7th July 2013, 10am - 3pm**

Duration of the art competition: **2 hours**

### Registration

1. Registration fees: RM10 per participant. Goodies bag will be given to all participants.
2. Dateline registration by 24th June 2013
3. Registration could also be submitted to the following address:  
c/o Rotary Club of Bandar Utama  
B-8-2 Tower B, BBT One, Lebuhr Batu Nilam1, Bandar Bukit Tinggi,  
41200 Klang, Selangor Darul Ehsan, Malaysia

### Eligibility & Rules

1. The competition is only applicable for Malaysian participants.
2. This competition is open to all special needs children and adults with learning disabilities - Autism, Asperger Syndrome, Down Syndrome, Global Development Delay, ADD, ADHD, William's Syndrome, Slow Learner and Dyslexia.
3. Entries will be judged in the following age groups: **A:** 15 years and below, **B:** 16 years and above. All participants will receive a certificate of participation.
4. Participants may use any art materials such as poster colour, watercolour, oil pastel, Acrylic paint and mix medium of your choice. We will provide pre-printed colouring drawing upon request by participants.
5. The art painting must be the participant's own original creation.
6. The winning art painting will not be returned. Rotary Club of Bandar Utama reserves the right to reproduce the painting for promotional purposes without a royalty fee. The artist will be given due recognition for their original painting.
7. The art competition's judges will be appointed by Rotary Club of Bandar Utama and their decisions will be final.

Registration Form: Entry Category: ☐ A ☐ B

Name of Participant: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ IC/Birth Certificate: \_\_\_\_\_

Current School/Centre: \_\_\_\_\_

Gender: ☐ Male ☐ Female

Types of Disabilities: \_\_\_\_\_

Name of Parents/Guardian: \_\_\_\_\_

Relationship to Participants: \_\_\_\_\_

Contact no & Email: \_\_\_\_\_

Residence / Centre: \_\_\_\_\_

Address \_\_\_\_\_

For Enquiries:  
The Rotary Club of Bandar Utama  
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Email: judychong.rc@gmail.com Fax: 03-3325 2166