



FRIENDS OF RECOVERY- NEW YORK
In Partnership with NYS OASAS
Announces the 20th Annual New York State
RECOVERY FINE ARTS FESTIVAL
*Virtually showcasing the achievements of those in recovery
through artistic expression*

The Recovery Arts Festival is open to all New York State artists in recovery from an addiction. This year's submissions should depict the theme, "Recovery Works: The Efficacy of Recovery Support Services and Multiple Pathways."

Please submit one (1) form of art in one (1) of the following categories via a photograph and/or a video. Please note that ONLY ELECTRONIC SUBMISSIONS OF ART WILL BE ACCEPTED. Any entry submitted through the US Mail will be refused.

- Poetry
- Drawing (graphite, pen & ink, colored pencil)
- Painting (oil, acrylic, pastel, watercolor)
- Photography
- Mixed Media
- Dance
- Music

A person may submit in more than one category, but only one submission per person, per category will be accepted. Please complete the fillable entry form attached for every category entered.

All artwork will be judged in September. Awards will be presented for 1st, 2nd, and 3rd place, as well as honorable mention in each category during our annual Recovery Conference. The esteemed OASAS Commissioner's Choice Award will be chosen from one of the categories, as well as an Executive Director and Staff Choice Award.

SUBMISSION GUIDELINES

1. Complete both the entry form and the signed consent agreement **being sure to initial the "I agree" box**. Incomplete entries will be disqualified.
2. Take a photo and if possible, a video of the original art you are submitting and include it with the entry form. **This is the only way your entry will be considered.**
3. Email all information to events@for-ny.org and indicate in the title that it is for the 2023 Arts Fest and the category of your submission. For example, the subject should say, "2023 Arts Fest – Poem."
4. All completed forms, photos of your artwork and/or videos **must be received by September 1, 2023.**



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ENTRY FORM

Please be sure to complete all the information requested below.

Incomplete submissions are subject to disqualification.

Artist Name: _____

Submission Category (select one):

- | | |
|--|---|
| <input type="checkbox"/> Poetry | <input type="checkbox"/> Drawing (graphite, pen & ink, colored pencil) |
| <input type="checkbox"/> Painting (oil, acrylic, pastel, watercolor) | <input type="checkbox"/> Photography <input type="checkbox"/> Mixed Media |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Music |

If your submission is selected as a winner, how can we reach you?

☐ Do you plan to attend the recognition dinner?

Telephone: _____ Cell: _____ Email: _____

Mailing Address: _____

Secondary Contact Person's Information (phone / email): _____

Treatment Center Name *(if currently in treatment)*: _____

Treatment Address: _____

Title of Submission: _____

Please tell us how this piece relates to "Recovery Works" (use additional sheets if necessary):

What materials did you use to create your visual art? _____

IMPORTANT:

- Entrants **MUST** attach a photo and/or video of the art when submitting these forms.
- All submissions **MUST BE RECEIVED BY September 1st** to events@for-ny.org.

For Official Use Only

I.D. _____



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CONSENT FORM

Please be sure to complete all the information requested below. Incomplete submissions are subject to disqualification.

I, _____, in consideration for my participation in the 20th Annual New York State Recovery Fine Arts Festival 2023, agree as follows:

- 1) I am over the age of eighteen years, or, if not over the age of eighteen years, my parent and/or legal guardian also agree on my behalf as follows.
- 2) I am the artist and owner of the art submitted for exhibition by FOR-NY and their recovery month partners and have full right and authority to consent to the exhibition of the art submitted.
- 3) Any artist submitting work which contains a photographic likeness or audio recording which implies or identifies an individual as receiving, or having received, chemical dependence treatment must provide a legally sufficient consent from that individual before the artwork can be accepted for participation in this event.
- 4) I understand, consent and agree that FOR-NY, in its sole and unrestricted discretion, has the right to amend the categories of the exhibition for any reason whatsoever.
- 5) I hereby consent to the exhibition and/or publication by FOR-NY, its agents and/or designees of the art submitted.
- 6) I hereby consent to FOR-NY posting on its website, social media channels, and/or publications my name, my photograph and the art submitted by me.
- 7) I understand, consent and agree that FOR-NY, in its sole and unrestricted discretion, has the right to reject the art submitted for exhibition for any reason whatsoever, including, but not limited to depiction of inappropriate content such as ridicule, nudity, pedophilia, pornography, or offensive or graphic violence.
- 8) I authorize FOR-NY to refer to me as a "Person in Recovery" or use my full name and/or my photography in any release or statement pertaining to the art submitted for exhibition, or in any award, release or statement pertaining to the exhibition.

_____ ***Please initial here*** to indicate that you agree to all the terms and conditions as indicated above.

Signed: _____ Dated: _____

If a minor, signature of parent/guardian: _____