

FREEDOM OF EXPRESSION CONTEST

THE ART OF PROTEST

PRO•TEST (NOUN):

A STATEMENT OR ACTION
EXPRESSING DISAPPROVAL OF
OR OBJECTION TO SOMETHING.

Here at the NYCLU, we believe in the power of protest. We know from history and experience that protests start conversations, change people's minds, and influence policies.

Given the Trump administration's attacks on civil rights and civil liberties, it is especially important now more than ever to take a stand for what you believe in, to share your vision of a fair and just society, and to express your beliefs freely.

TELL US: WHAT ISSUES MATTER TO YOU MOST? WHAT ARE YOU FIGHTING FOR?

Artistic expression can, in itself, be a form of protest and here in NYC we have seen firsthand the importance of art in local demonstrations

SHARE WHAT THE ART OF PROTEST MEANS TO YOU

Submit a photograph, a protest sign, banner, any original artwork you created as part of a protest.

DEADLINE: Fri., May 26, 2017

THOUSANDS OF DOLLARS IN PRIZE MONEY!

RULES:

WHAT TO DO

Respond to the theme by submitting a photograph, a protest sign, banner, any original artwork you created as part of a protest. Only visual entries will be accepted. Group entries are accepted.

HOW TO SUBMIT

By mail: NYCLU Contest, 125 Broad St., 19th Fl, New York, NY 10004. Or email entries to: contest@nyclu.org

CONTACT

Questions, complete rules and info: call 212-607-3387, visit www.nyclu.org/contest or email contest@nyclu.org.



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NYCLU FREEDOM OF EXPRESSION CONTEST 2017

Entries must be original (group entries accepted), and will not be returned. Only visual entries will be accepted. Applicants must be 13 to 21 years old and live in New York City. Current and former NYCLU/ACLU clients, staff and board members, and their relatives, are not eligible. Finalists will be invited to Broadway Stands Up for Freedom - the annual NYCLU benefit concert where select entries will be featured.

ENTRY INFO:

TITLE OF ENTRY _____

TELL US MORE ABOUT YOUR SUBMISSION _____

STUDENT INFO:

NAME _____ AGE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CELL PHONE _____ EMAIL ADDRESS _____

SCHOOL/ORGANIZATION INFO:

SCHOOL/ORGANIZATION NAME _____

BOROUGH _____ TEACHER/ORGANIZATION LEADER _____

CONTACT INFO (PHONE/EMAIL) _____

I certify that I am submitting my original work. I acknowledge that all work submitted cannot be returned and may be used by the NYCLU in the future, including on their website and during their annual benefit concert.

Signature _____ Date _____

Please send completed forms and entries by **Friday, May 26, 2017** to:
NYCLU Contest 125 Broad Street, 19th Fl, New York, NY 10004, or email to contest@nyclu.org

Questions? Phone: 212.607.3387 | Email: contest@nyclu.org