

Tiny Paws Con

Author/Artist Release Form

I, _____, hereby release the following written work or artwork for use by Tiny Paws, Inc. in accordance with the guidelines listed on the Tiny Paws Con website.

Title(s):

Name to be displayed with submission:
(IF DIFFERENT FROM YOUR REAL NAME)

Contact Information

Full Name:

Mailing Address:

Phone Number:

E-Mail Address:

SIGNATURE

DATE

If sending this form in by snail mail, please send it to:

Tiny Paws, Inc.
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Rockfall, CT 06481-0219