

2nd Annual Native American Youth Virtual Animation Lab December 14th - 15th, 2020 Application

| NAME: |
|--|
| AGE: |
| ADDRESS: |
| PHONE: |
| EMAIL: |
| SOCIAL MEDIA HANDLES: |
| TRIBAL AFFILIATION (Please note if you are enrolled or self-identify): |
| HOW DID YOU HEAR ABOUT THE LAB? |
| Please enclose a 500 word maximum description of your interest in |

animation.