

Mail your submission to

ATTN: Kari Heistad

Minnesota Opera Center

620 N 1st Street

Minneapolis, MN 55401

Please fill out the following information and mail it in with your comic:

Name: _____ **Grade:** _____

School: _____

Teacher or Parent/Guardian: _____

Title of Comic: _____

Contact info for student, teacher, or parent/guardian (optional):

Email: _____

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Anything else you'd like to share? _____
