



RAY OF HOPE



T-SHIRT DESIGN CONTEST

See your design here on this year's Awareness T-Shirt!

Past Designs:

NEVER
give up
hope 

2023

Hold onto
HOPE;
tomorrow needs you

2024

Good News!
You Are Enough
on your best and worst days!

2025

Calling all Creatives! Join Our T-Shirt Design Contest!

You have the chance to design this year's Awareness T-Shirt for the 20th Annual Ray of Hope Walk for Suicide Awareness & Prevention!



HOW TO ENTER:

- 1 Create a captivating design of a Suicide Awareness Saying and/or Graphic.
- 2 Submit your design via email to EGoldberg@mhaswpa.org by Thursday April 30, 2026.
- 3 Ray of Hope's Walk Committee will vote on the designs at their May 12th Walk Planning Committee meeting.

FOR CONTEST DETAILS, RULES, & ENTRY FORMS EMAIL: EGOLDBERG@MHASWPA.ORG OR VISIT RAYOFHOPEWESTMORELAND.ORG

www.RayofHopeWestmoreland.org



All submissions for the Ray of Hope: Westmoreland County Suicide Awareness and Prevention Task Force Awareness T-shirt Design Contest **MUST** follow the rules below or the entry will NOT be accepted. There are no exceptions.

Rules for Submission:

1. ***Who is eligible to enter?***

This contest is open to anyone who currently resides in Westmoreland County.

2. ***Collaboration is permitted.***

If 2 people want to work together that is permitted.

3. ***One Color Imprint on a Solid Color Shirt***

Your design must be all one color and will be imprinted on a solid color t-shirt. Winner will get to choose the t-shirt color (with the exception of red). Please keep this in mind and choose your design color accordingly.

4. ***Size of Imprint Area***

10" x 10"

5. ***Copyright***

Please follow all copyright rules regarding phrases and images.

6. ***Computer Applications Are Permitted***

Using computer applications such as Canva, Adobe Illustrator, Corel Painter, etc. are permitted.

7. ***It is fully acceptable to hand draw an image and then SCAN that image into the proper file format.***

It is also possible to hand draw the graphics, scan the image, and then digitally print the message over the scanned image. As long as the submitted product is sufficiently able to go directly to the printer as is, it will be accepted.

8. ***All Submissions MUST be submitted in one of the following formats:***

Preferred Vector File Types:

PDF (Adobe Acrobat)

- Embed the fonts used or export as generic .eps

Other Accepted File Types:

DOC, PPT or PUB (Microsoft Office Files)

- Embed or include fonts

BITMAPS (.jpg, .png)

9. Content of Messaging

Please consider the following when exploring your creativity:

a. Positive Messaging

We are encouraging contest participants to use positive messaging in their design. Nothing negative or offensive will be accepted. Please keep those who have lost a loved one to suicide in mind while creating your design. Words matter.

b. Information that may be helpful:

- Each year Ray of Hope designs 2 different T-shirts.
 - Walk Shirt – Given to all registered attendees (included with registration)
 - Awareness Shirt – Worn by all Volunteers on Walk Day. These shirts will also be for sale on Walk Day! This is the shirt you are designing!
- This is the 20th Annual Walk! NOTE: Your design is NOT required to include this.
- Our theme is: “Message of Love; 20 years of Hope” – this theme will be imprinted on our “Walk T-Shirt” (this is a different shirt – not the same as you are designing) – Please do not use this exact phrase in your design but feel free to incorporate elements of the theme.
- The flyer shows the 2023, 2024, and 2025 Awareness Shirt designs so you can see what we’ve done in the past. Please don’t copy these, they are just to give you an idea.

10. All Design Submissions should follow the same file naming format

Last Name, First Name (example: Smith, John)

11. All design submissions must be received by April 30, 2026 via email to:

Ray of Hope

Lisa Goldberg

EGoldberg@mhaswpa.org

12. You MUST adhere to these submission rules and requests. If any of the above criteria are not met, we will not be able to accept your submission.



Ray of Hope

Westmoreland County Suicide Awareness & Prevention Task Force 2026 Awareness T-Shirt Contest

This Application must be emailed with your submission by April 30, 2026.

Name:

Age:

Home Address:

City:

Zip Code:

Phone Number:

Email Address:

Did you collaborate with anyone on this submission? Yes No

If yes, please complete the information below for who you worked with:

Name:

Age:

Home Address:

City:

Zip Code:

Phone Number:

Email Address:

Terms and Authorization:

By submitting the enclosed/attached t-shirt graphic design to the Ray of Hope: Westmoreland County Suicide Awareness and Prevention Task Force (ROH), I understand that I am turning over the rights to the artwork, phrase, and/or image(s) to ROH. Further, I understand that ROH may take my submission and place it on their website, submit it to the media, and/or may reproduce it in some form as a public service campaign. ROH will acknowledge my contribution whenever possible.

By signing, I acknowledge that I am submitting the attached t-shirt graphic design on behalf of myself and any other people with whom I have worked. I certify that the work is entirely that of my own and/or my creative partners. I certify that I followed all of the rules of submission.

ROH may contact me if they have any questions regarding my submission. If the applicant is under the age of 18, ROH will not contact the minor directly without also addressing the parent or guardian. In order for this submission to be valid, we need signatures of the applicant as well as parent or guardian.

By signing, I _____ acknowledge that I have read the rules for submission and have adhered to such rules. I am aware that not adhering to these rules will mean that my submission will not be accepted.

Printed Name of Applicant

Signature of Applicant

Date

If applicant is under 18 years of age:

Parent/Legal Guardian Name (type/print)

I am aware that my child is submitting an application for this contest and that any correspondence regarding this contest will be directed to both me and my child.

Parent/Legal Guardian Signature

Date

Parent/Legal Guardian Email Address:

Parent/Legal Guardian Mailing Address:

City:

Zip Code:

Phone Number:

Complete the application electronically or manually, print, sign and date. Please obtain signatures of mentor/legal guardian. Email application form with T-Shirt Design submission. (must be received by April 30, 2026)

to:

Lisa Goldberg

EGoldberg@mhaswpa.org

Contact for more information:

Lisa Goldberg: egoldberg@mhaswpa.org or call/text 724-875-2415