

Exhibition Name

Fees are \$10 per selected Artwork/Item • Limit of 3 entries per artist

Date: _____

TYPE OF PAYMENT: Amount _____ Check? # _____ Cash? Credit Card?

Rec'd by: _____

Conroe Art League **Artist Registration**

NAME: _____

ADDRESS: _____ CITY/ST/ZIP _____

PHONE: HM _____ CELL _____

E-MAIL ADDRESS: _____

WAIVER:

By my signature below, I release the Conroe Art League and its representatives from any and all claims of damage, theft, or loss of any Artwork/Item on exhibition at the Gallery. I have read and agree to the guidelines set forth in the CAL "Gallery Policies". The Artwork/Item is my original creation. I understand that any unclaimed Artwork/Item left after the display date expires will be removed from the exhibition site and I will be charged a storage fee of \$2 per day.

SIGNATURE: _____ **DATE:** _____

DONATION/VOLUNTEER AGREEMENT:

I understand that CAL expects a donation for each sale made in the gallery or if Artwork/Item is removed before the end of an exhibition. Rates are: **20%** - single piece priced \$1-1,000; **10%** - single piece priced \$1,001 – 2,500; **5%** - single piece priced \$2,501 and higher. Artists will be paid for sold pieces within two weeks after the close of the exhibit less the amount of the donation percentage. I understand that I am required to **work one 3.5 hour shift** for each piece of artwork exhibited.

SIGNATURE: _____ **DATE:** _____

Please fill out completely---

Title: _____ **Title:** _____ **Title:** _____
Item # assigned by CAL **\$** _____ **Item #** assigned by CAL **\$** _____ **Item #** assigned by CAL **\$** _____

Item # _____ Artist: _____ Phone: _____ Title: _____ Medium: _____ Framed: YES NO Size: H: _____ W: _____ D: _____ Price: _____	Item # _____ Artist: _____ Phone: _____ Title: _____ Medium: _____ Framed: YES NO Size: H: _____ W: _____ D: _____ Price: _____	Item # _____ Artist: _____ Phone: _____ Title: _____ Medium: _____ Framed: YES NO Size: H: _____ W: _____ D: _____ Price: _____
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