

## GALLERY ROW APPLICATION FOR MEMBERSHIP

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

UBI # \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

What type of media are you submitting for jurying?

Please describe your process.

How long have you been in business as an artist?

Please describe your experience working as a member of a team, any sales experience and what skills you have that will help further the goals of the Gallery. Are you willing and able to spend 2-3 days a month staffing the Gallery, attend a monthly meeting and rehanging, as well as participating in special events, such as Art Walk?

**Drop off Application or Mail Application to:**

**GALLERY ROW Attention: Screening Committee**  
3102 Harborview Drive  
Gig Harbor, WA 98335