

IMPORTANT – CUT THIS TOP FORM OUT AND GIVE TO GALLERY MEMBER ACCEPTING YOUR WORK
(Clearly PRINT your information as you want it to appear on labels)

ARTIST'S NAME _____

PHONE NUMBER _____ EMAIL _____

(PLEASE PRINT SO AS TO BE READABLE)

1. _____ MEDIUM _____ PRICE _____
TITLE

2. _____ MEDIUM _____ PRICE _____
TITLE

3. _____ MEDIUM _____ PRICE _____
TITLE

Be Sure your name and phone/email are on the back of each piece of Art!

CUT HERE - - - - -

TAPE ONE OF THESE LABELS TO THE FRONT OF EACH PIECE YOU ENTER

(Be sure the tape will not damage your work when it's removed. If this is impossible, attach on the back so it hangs down below the painting and can be seen after the painting is hung! *This is so we know where to put the labels!*)

CUT HERE - - - - -

ART PIECE 1

ART PIECE 2

ART PIECE 3

Artist _____ Artist _____ Artist _____

Title _____ Title _____ Title _____

CUT HERE - - - - -

KEEP THIS FORM AND BRING IT BACK TO THE GALLERY TO RETRIEVE YOUR ART

(July 1 or 2)

Artist (Print) _____

ART PIECE 1

ART PIECE 2

ART PIECE 3

Title _____ Title _____ Title _____