

ANGLICON ART SHOW REGISTRATION FORM

2017 Artist Name _____ Agent _____

Name _____

Address _____

Phone (day) _____ (evening) _____

Best time to call: Best time to call: _____ e-mail address _____

Status: Amateur Professional Make checks payable to: _____

My art will arrive with: me; my agent; by mail; by UPS; by Fed-Ex; or by _____

Please return artwork to: me; my agent; by mail; by UPS; by Fed-Ex; or by _____

Please provide a brief description of your artwork, such as pen & ink astronomical, watercolor horror, stained glass robots, Lucite masks, Minbari head crest decorations, etc.

I wish to reserve the following space (maximum total of 3 panel and/or table units per artist unless cleared by the Director).

_____ panels (4' x 6') at \$10 each totaling: \$

_____ table units (3' x 2.5') at \$10 each totaling: \$

"Print Shop"---Free, but please let me know we need to have room for you.

I am sending my artwork by mail/UPS/etc. Return Mailing enclosed of \$ _____

Total amount enclosed for art show reservations, handling postage and memberships \$ _____

Please make checks payable to Anglicon. Please do not send cash.

Please check all appropriate items, use the space below to be specific and attach extra sheets if needed:

I will allow credited press photography of my artwork. [No photos without your permission.]

I will allow the Anglicon Art Show to give my address to buyers requesting it at the Art Show.

I will allow the Anglicon Art Show to share my address with other conventions.

I would like to have my email address/website posted on the Anglicon Art Show website. I would like to help with the Art Show during the convention.

I will be bringing display cases for my 3-dimensional artwork and/or jewelry (highly recommended).

I have special display needs for my artwork-floor space, electricity, etc. Please specify below.

I am interested in participating in art-related programming-panels, workshops, demonstrations.

If you have any questions or comments, please feel free to include them with this form. Please return this form along with your payment to: Anglicon Art Show c/o Caitlin Bennett 514 223 PL SE Bothell, WA 98021 (206) 604-4549 artshow@anglicon.org

REMINDER: THIS RESERVATION FORM WILL NOT BE ACCEPTED UNLESS ACCOMPANIED BY A SIGNED RELEASE FORM.

Anglicon 2017 Art Show Agreement

The exhibitor agrees not to hold Anglicon liable for any damages or charges imposed for violations of any law or ordinance by any exhibitor, his employees or agents, as well for failure to comply with the terms and agreements. Remember, the exhibitor shall at all times indemnify and hold harmless Anglicon, its Executive Committee, staff, and volunteers, from any loss, cost, damage, liability or expense which arises out of or by reason of any act or omission of exhibitor, his or her employees or agents.

If you have any questions about these rules, or have any special requirements, please email the Art Show Directors at artshow@Anglicon.org in advance.

All correspondence concerning the art show should be addressed to: artshow@angilcon.org

The mailing address for all pieces to be entered in the Art Show if an artist is not able to attend the Convention is:

Caitlin Bennett
514 223 PL SE
Bothell, WA 98021
(206) 604-4549
artshow@Anglicon.org

I have read, understand, and hereby agree to the Anglicon rules for the 2017 Art Show.

Signature: _____

Date: _____

Name (please print): _____

Agent for (please print): _____

Special instructions: