



ASHCROFT ART CLUB • Box 55, Ashcroft, BC V0K 1A0

FINE ART SHOW ENTRY FORM

NAME _____ CITY _____

Only fill in phone number and email/website if you want them to appear in the catalogue

PHONE # _____ EMAIL/WEBSITE _____

TITLE OF ART WORK	MEDIUM	IMAGE SIZE (Height" x Width")	SALE PRICE
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

WAIVER: The undersigned agrees not to hold the Ashcroft Art Club or any of the members, staff, or volunteer workers liable for any damage, loss, or injury to person or property sustained by reason of accident or incident occurring in or about their premises. Further, I waive any claim I have with respect to any loss of, damage or injury to my work submitted under this Entry Form.

All and any insurance coverage on the exhibited work is the responsibility of the Artist.

I HAVE READ & AGREE TO THE TERMS & CONDITIONS

SIGNED _____

DATE _____

COMPLETED FORM AND ENTRY FEE OF \$15.00 DUE APRIL 5, 2019

Drop artwork off at the hall April 25, 10:00AM

Ashcroft Art Club Entry Form

Title: _____

Medium: _____

Artist: _____

Please tape this to the back of art piece

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