

Art Show Registration Form

ARTIST	
Legal name	
Address	
Phone	
Email	
Website	
Studio Name	
Nickname	

AGENT	
Name	
Address	
Phone	
Email	
Website	

Make check payable to

I consent to Press Photography/Videography of my work.

Amount of Display Space Requested: panel(s) table(s) Mail-in?

Mail-In Fee (if applicable)
 Return Postage (Mail-In only)

TOTAL AMOUNT DUE

I agree to all of the stated rules for this Art Show.

Artist/Agent Signature

Art Show Control Sheet

Location	
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Artist ID	
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Page ___ of ___

Artist	
--------	--

	Date	Number of Items	Staff Initials	Artist/ Agent
Check In				
Check Out				

Total Sales	
-10% commission	
Amount due to Artist	

Item Number	Title (print edition, media)	Minimum Bid	Quick Sale	Final Sale
01				
02				
03				
04				
05				
06				
07				
08				
09				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

Art Show Bid Sheet

Artist	Control #	
Title		
Media		
		Minimum Bid
		Quick Sale

Bidder Name	Number	Amount

BIDS MUST BE IN WHOLE DOLLARS ONLY!
Fourth Bid Sends the Item to Voice Auction

AUCTION: (Staff Use Only)		
Bidder Name	Number	Amount

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