



ACT! ARTS COUNCIL OF TAMWORTH

ANNUAL ART SHOW & SALE
RUNNELLS HALL, CHOCORUA, NH
Artists' Reception and Opening: 7 to 9 PM, Friday, July 24, 2009
Exhibition: 10 AM to 4 PM, July 25 and 26, 2009

REGISTRATION FORM

ARTIST'S NAME: _____

ADDRESS: _____

TELEPHONE: _____ EMAIL: _____ WEBSITE: _____

Each artist in the media of painting, photography, printmaking, sculpture, fiber, woodworking, jewelry, pottery and mixed media may submit a maximum of three (3) pieces. We encourage you to submit recent work. At least one piece from each artist *must* be offered for sale. ACT takes a twenty (20) percent commission on works sold, then sends a check for the net sale to the artist.

All paintings must be framed and wired. All photographs and other graphic media must be mounted, matted, framed and wired. All other work that requires hanging must be wired. Please bring platforms, stands or display units if necessary for the safe display of your three-dimensional work. Work not in conformity cannot be guaranteed display space. Please label the back or base of each piece with title and artist's name, or attach this info in some way.

All work must arrive at Runnells Hall on Thursday evening, July 23, between 5 PM and 7 PM. When you bring your work you will be asked to confirm that the title and cost info we have is correct; if someone else is dropping off your work, be sure they have this info. You must bring registered work only. We cannot accept changes in what work you are registering after July 10.

An Artist Directory will be available at the Artists' Reception and at the show. Please enclose a 65- to 100-word biography on a separate sheet, or, preferably, email it to the address below with BIO and your name in the subject line. If you have a website or contact info you would like people to know about, please include that information in your biography.

1. Title: _____

Media: _____

Size: _____ Price: _____

2. Title: _____

Media: _____

Size: _____ Price: _____

3. Title: _____

Media: _____

Size: _____ Price: _____

My \$10.00 entry fee is enclosed _____. My artist biography is enclosed _____/has been emailed _____.

I fully understand that every reasonable precaution will be taken with my submitted work. However, I agree that ACT will not be responsible for the loss or damage to my work from any cause.

Date: _____ Signed: _____

RETURN THIS FORM NOT LATER THAN JULY 10 TO:
Myles Grinstead, PO Box 452, Chocorua, NH 03817
chocoruapotter@yahoo.com • 603-323-7182
For more information visit www.artstamworth.org or call 603-323-8104.