Topeka Art Guild

Please Print: Artist Name:						
Address:						
Email:Phone:						
Gallery Exhibit:			Months Consigned:			
Title	Medium	Price	Fee/Size	Sold (Date)	Agree to Display after Exhibit*	
Please check his last column if you AG	REE to any entry you	ı would like	to include in a	an outside exh	ibit at area businesses.	
Please check his last column if you AGREE to any entry you would like to include in an outside exhibit at area businesses. The hanging committee will try to accommodate as many as possible. Inclusion is based on available space. The final selection will be at the discretion of the hanging committee. Only artwork displayed in the current TAG Gallery exhibit will be considered for display at other businesses. By signing this entry form, you are giving TAG permission to feature your artwork for promotional pieces.						
Please initial beside each statement below to denote your understanding of these issues:						
☐ I understand the art will be juried internally or externally depending on the show and that my entry fees are non-refundable.						
☐ I understand photos of my work and/or specific events.	may be used on the v	website, on	postcards or i	n brochures fo	r marketing TAG	
☐ I understand that the Topeka Art G things happen that are unavoidable. ⁻	Guild will take the bes Fopeka Art Guild is no	st care possi ot responsib	ble of the art, lle for any dar	but I understa nage to my wo	and that sometimes ork while in their care.	
\square I understand that if I work the 12 h	ours during the two	month exhi	bit, I will recei	ve a 70% com	mission for sold work.	
☐ I understand that if I do not work the 12 hours during the two month exhibit, I will receive a 55% commission for sold work.						
Signature of the Artist: Date:						