

# GALLERY ON THE GREEN

CANTON ARTISTS' GUILD, INC. *founded in 1960*

Exhibition Title: \_\_\_\_\_

If Member/Guest, I am a guest of \_\_\_\_\_

Total Entires for this Exhibition \_\_\_\_\_ Guild Member:  Yes  No (check one)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

e-mail (required) \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_

By signing here I agree to the Conditions for Showing Art

Signature \_\_\_\_\_ Date \_\_\_\_\_

1. Title \_\_\_\_\_

Medium \_\_\_\_\_ Price \_\_\_\_\_  
if POR or NFS, insurance value must be given

Signature at Pick-up \_\_\_\_\_ Date \_\_\_\_\_

2. Title \_\_\_\_\_

Medium \_\_\_\_\_ Price \_\_\_\_\_  
if POR or NFS, insurance value must be given

Signature at Pick-up \_\_\_\_\_ Date \_\_\_\_\_

3. Title \_\_\_\_\_

Medium \_\_\_\_\_ Price \_\_\_\_\_  
if POR or NFS, insurance value must be given

Signature at Pick-up \_\_\_\_\_ Date \_\_\_\_\_

4. Title \_\_\_\_\_

Medium \_\_\_\_\_ Price \_\_\_\_\_  
if POR or NFS, insurance value must be given

Signature at Pick-up \_\_\_\_\_ Date \_\_\_\_\_