

MEMBER SHOW ENTRY FORM



Artist Name _____

Address & Zip _____

Phone _____

Cell Phone _____

Email _____

I have read and agree with the terms listed in this prospectus, and I accept that the Marlborough Arts Center assumes no responsibility for loss or damage of any kind.

Signature _____

All submitted work should be ready to hang.

Important dates:

- Drop off artwork—November 3rd (10-3) and 4th (3-6pm)
- Opening weekend—November 9th and 10th (1-4pm)
- Artist reception and awards presentation—December 8th (1-4pm)
- Pick up art—January 5th (1-3 pm) or January 6th (3-6 pm)

FEES	
Entry #1 (\$20.00)	_____
Entry #2 (\$5.00)	_____
Entry #3 (\$5.00)	_____
Or free (under \$100/ price)	
Paid up 2019 dues	_____
Total	_____
Note: MAC will collect a 20% commission on all works sold.	

Please fill out the following for each entry and attach to the back of each work.

✂

ENTRY #1
Name _____
Phone _____
Cell Phone _____
Email _____
Title of Work _____
Medium _____
Price _____
Name _____
Title of Work _____
Medium _____
Price _____

✂

ENTRY #2
Name _____
Phone _____
Cell Phone _____
Email _____
Title of Work _____
Medium _____
Price _____
Name _____
Title of Work _____
Medium _____
Price _____

✂

ENTRY #3
Name _____
Phone _____
Cell Phone _____
Email _____
Title of Work _____
Medium _____
Price _____
Name _____
Title of Work _____
Medium _____
Price _____