



Plymouth Community Arts Council

Musical Theme Art Exhibit – May 2010

Artist Registration Form

ENTRY 1 *(please print)*

Name _____

Address _____

Phone _____ Email _____ Website _____

Title _____ Media _____

Price *(if for sale)* _____ Insurance Value _____ Size _____
(if for sale, subject to consignment contract) *(if NOT for sale)*

ENTRY 2 *(please print)*

Name _____

Address _____

Phone _____ Email _____ Website _____

Title _____ Media _____

Price *(if for sale)* _____ Insurance Value _____ Size _____
(if for sale, subject to consignment contract) *(if NOT for sale)*

PLEASE ATTACH A BRIEF ARTIST BIOGRAPHY

Signature _____

Artist's signature assures that he/she has read and understands PCAC exhibit guidelines and PCAC standard artist contract.

Date: _____

Each entry must be properly labeled on back of item. No more than TWO (2) entries will be accepted from each artist. All entries must be submitted THURSDAY, APRIL 22 between 9 am and 5 pm at the Plymouth Community Arts Council, 774 N. Sheldon Road, Plymouth MI 48167 contact: (734) 416-4278 / tamara@plymoutharts.com