

Application to Exhibit Speers Gallery at Kennebunk Free Library

Applications must be submitted by October 15th each year to be considered for exhibit for the following calendar year.

| Date: | |
|---|---|
| Name of Exhibitor: | |
| Title or Subject Matter of Exhibit: | |
| Number of Works: | Media Used: |
| Name of Person Filing Application: | |
| Name of Organization: | |
| Address: | . |
| Phone Number(s): | |
| Email Address: | |
| Preferred Exhibit Month(s):* | |
| Please note that the Art Committee cannot go scheduling process. | uarantee preferred months, but will take them into consideration in the |
| Briefly Describe the Proposed Exhibit: | : |
| | |
| | |
| | |
| Will you have an Opening Reception? | Yes No |
| If you are selected, there is a \$25 exh reception. | ibit fee to help cover cost of promotion. There is a \$10 fee for a |

<u>Please submit images of ALL pieces you'd like to exhibit, and fill out the information below:</u>

- Please label each file or item with the name of the piece.
- You may email images to exhibits@kennebunklibrary.org, or submit on a CD or flash drive labeled with your name. You can also submit photographs (no slides please).
- Resolution must be no less than 300 dpi if submitted electronically (.jpg or .pdf).
- CDs, flash drives, photographs, etc. will not be returned unless accompanied by a stamped, self-addressed mailer.

| IMAGE #1 | IMAGE #2 |
|----------------------|----------------------|
| Title or Description | Title or Description |
| Media: | Media: |
| Dimensions: | Dimensions: |
| IMAGE #3 | IMAGE #4 |
| Title or Description | Title or Description |
| Media: | Media: |
| Dimensions: | Dimensions: |
| IMAGE #5 | IMAGE #6 |
| Title or Description | Title or Description |
| Media: | Media: |
| Dimensions: | Dimensions: |
| IMAGE #7 | IMAGE #8 |
| Title or Description | Title or Description |
| Media: | Media: |
| Dimensions: | Dimensions: |
| IMAGE #9 | IMAGE #10 |
| Title or Description | Title or Description |
| Media: | Media: |
| Dimensions: | Dimensions: |

| Please feel free to provide the Art Committee with additional information that you feel would be useful in reviewing your application (i.e Background, Awards, Formal Training). | | |
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| By signing this application, I acknowledge I have read and agree to abide by the conditions of the Kennebunk Free Library Exhibit Policy. | | |
| Signature: | | |
| Date: | | |
| | | |
| | | |
| | | |
| Library Use Only | | |
| | | |
| Date Received: Person Receiving: | | |
| CD/Photos Included? Yes No Return Requested? Yes No | | |
| Acknowledgement Sent? Date: | | |
| Submitted to Committee? Date: | | |

Committee Decision: __ Yes ___ No __ Alternate

Month Scheduled: _____