WELLS PUBLIC LIBRARY

ETHEL M. WEYMOUTH ART EXHIBIT APPLICATION FORM

This application form accompanies the Wells Public Library Ethel M. Weymouth Art Exhibit Policy and Art Exhibit Guidelines. Both of those documents must be read before completing this form.

Name___________________________________ Date____________________

Address__________________________________________________________________________

Summer/winter address, if different___________________________________________________

Phone (home)_________________________ (work)______________________________

E-mail address ________________________________________________________________

Type of art & media______________________________________________________________

Three images representative of the work to be shown e-mailed to Library Director or his/her designee.

Yes_____                           No______

I have read and agree to abide by the attached Wells Public Library Ethel M. Weymouth Art Exhibit Policy, the attached Art Exhibit Guidelines, and to sign a waiver of liability and letter of intent.

Signature of Applicant __________________________________________________________

Date__

Signature of Approval by Library Director or designee ________________________________

Date__