

REGISTRATION FOR ST. MARK'S LENTEN ART SHOW

File Information (to use for future contacts):

Artist's Name: _____ Phone: () _____
(as it should appear in the program)

Street Address: _____ City _____ Zip _____

E-mail (optional) _____

Optional information (to be used only to publicize the show)

My neighborhood newspaper: _____ My neighborhood _____

Art Group Memberships _____

I attend church at: _____ Pastor's Name _____

The church address is _____

I acknowledge that I have read, understand, and agree to accept the following statement:

While every effort is made to protect entries, the Religious Art Festival, St. Mark's United Methodist Church and its officers, agents or representatives, assume no responsibility for damage, theft, or loss of entries. With entries received being subject to these conditions, insurance is the responsibility of the artist.

Signature: _____ Date: _____

1st Entry Identification (to be placed on the work after registration)

Registration # _____

Artist's Name: _____ Medium: _____

Title: _____ Price: _____

Post-Show Receipt (to be retained by St. Mark's)

Returned to: _____ Date _____

Returned by: _____

2nd Entry Identification (to be placed on the work after registration)

Registration # _____

Artist's Name: _____ Medium: _____

Title: _____ Price: _____

Post-Show Receipt (to be retained by St. Mark's)

Returned to: _____ Date _____

Returned by: _____

3rd Entry Identification (to be placed on the work after registration)

Registration # _____

Artist's Name: _____ Medium: _____

Title: _____ Price: _____

Post-Show Receipt (to be retained by St. Mark's)

Returned to: _____ Date _____

Returned by: _____