

ARTIST SUBMISSION/EXHIBITION FORM

Name: _____

Phone #: _____

Address: _____

E-mail: _____

Website: _____

Bio: _____

Description of artwork: _____

Title: _____

Dimensions: _____

Price/NFS: _____

Medium: _____

Artist's statement *(if desired)*

[] I give the following consent to Temple Sinai to use my name, town and photographs for publicity purposes and publications. In particular, I understand that such photographs or images may, among other uses, be used by Temple Sinai in electronic or other brochures, listings, advertising, websites, or the local community newspapers. I also understand that no addresses will be listed but names (first and last) may be submitted or posted. I authorize the use of these photographs or images indefinitely and release Temple Sinai from any liability for any such use of information.

Signature: _____



SUBMISSION DISCLAIMER:

By submitting this work you attest to its authenticity and that you own the right to display the work. You also give Temple Sinai the right to showcase this work in its gallery. We reserve the right to not display any submitted work for any reason.

Temple Sinai will not be liable for loss, theft or damage while artwork/s are in its possession. The artist shall bear all responsibility with respect to the artwork , including without limitation all liability for loss, theft or damage.

The artist is responsible for pick-up of artwork by _____, and must make arrangements with the office for another person to pick up the artwork if the artist is not able to do so. A picture I.D. will be required when the artwork is picked up.

Signature: _____

Date: _____