

# AMURI COMMUNITY ARTS COUNCIL



## EXHIBITORS APPLICATION FORM

Name.....

Address.....

.....

Phone..... Fax.....

Email.....

Brief Description of your Art/Craft.....

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Please put an extended Artist profile on a separate sheet.

Preferred month/date to exhibit.....

Requirements for your display.....

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If you need wall space only would you consider allowing another artist using/sharing the cabinets?. please circle one. YES NO

If you need cabinets and box space only would you consider allowing another artist using/sharing the wall space?. Please circle one. YES NO

Please have a catalogue or cards with title and prices of your works to be displayed beside each work.

Date.....

Signature.....

Fill in and mail too :-

Margaret & Carl Thompson  
P.O.Box 113  
Hanmer Springs, 7334