

Reliquary Art Show Registration Form

Name: _____

Address: _____

Phone number(s): _____

Name of pieces you are entering, medium, sale price if applicable:

1. _____

2. _____

3. _____

4. _____

5. _____

Special instructions: _____

Your completed registration form and your cash entrance fee of \$15.00 must be received by April 15th 2009. Envelope should be addressed as follows:

Reliquary
303 W. Waverly Ave.
Goshen, IN 46526

I understand that all the work I intend to be displayed in Reliquary on May 16 & 17, 2009 along with any and all unique display elements must be dropped off at 303 W. Waverly Avenue on or before May 13th at 10pm. Art will be available for pick up Sunday evening after 8pm. All art left after the show in the care of Reliquary volunteers will be steward until Wednesday morning, May 20th at 10:30am. Should you sell any work at Reliquary, a check will be issued in your name and received upon sale if you are present or upon the retrieval of your work.

Signed: _____

Other Considerations, Notes: _____

Further questions or concerns, please email inquires@reliquaryshow.info or call 574/849-1146