



Visual Art Exhibit Exhibit Name \_\_\_\_\_

Please return this registration and release form one week before the scheduled opening reception. See website: upwitharts.org for current schedules.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_ (please print)

Work 1 Title: \_\_\_\_\_

Media: \_\_\_\_\_ Price: \_\_\_\_\_

Size: \_\_\_\_\_ length \_\_\_\_\_ width Special Notes: \_\_\_\_\_

Work 2 Title: \_\_\_\_\_

Media: \_\_\_\_\_ Price: \_\_\_\_\_

Size: \_\_\_\_\_ length \_\_\_\_\_ width Special Notes: \_\_\_\_\_

Volunteers are needed to make our exhibits successful. Let us know how you think you can help. We will call or email you to confirm. Thanks for your time and cooperation!

\_\_\_ check-in artwork \_\_\_ hang artwork \_\_\_ provide food for reception \_\_\_ sign out artwork

**Exhibit Fees: \$8 for members, \$12 for non-members to exhibit one piece  
\$16 for members, \$24 for non members to exhibit two pieces  
\_\_\_ I could exhibit a third work, if requested (no additional charge).**

Eligibility: Adults are welcome to participate in all exhibits: however, the **Empowering the Artist Exhibit** is specifically for students and their teachers. Artists must be current members, renew or become a member to be a part of the Members Exhibit.

Yes, I'd like to \_\_\_ join or \_\_\_ renew my Arts Alliance membership at the following level:  
\_\_\_ Individual \$35 \_\_\_ Couple \$50 \_\_\_ Family \$60 \_\_\_ Donor \$125 \_\_\_ Benefactor \$250

Member name as you would like it published: \_\_\_\_\_

Payment by: check money order cash credit card TOTAL: \$ \_\_\_\_\_

MC/Visa/Discover/Amex #: \_\_\_\_\_ Exp. \_\_\_/\_\_\_ CVV2 code \_\_\_

Name as it appears on card: \_\_\_\_\_

Signature: \_\_\_\_\_

Checks payable to: Arts Alliance

155 Apsley Street, Hudson, MA 01749

☎ 978.562.1646

**Please sign the release form below. The Arts Alliance retains a 20% commission on any sales.**

As an artist and exhibitor at an Arts Alliance Exhibit, I hereby waive, release and discharge any claim I may have against the Hudson Area Arts Alliance or Citizens Bank for any and all damages to, theft of, or loss of my artwork. I do agree to hold the Hudson Area Arts Alliance and Citizens Bank free, harmless and indemnified from any and all such claims therefore.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Hard copies should be delivered by mail or in person to:**

**Arts Alliance 155 Apsley Street, Hudson, MA 01749**

**DUE TO SECURITY CONCERNS NO REGISTRATIONS WILL BE ACCEPTED VIA THE INTERNET OR BY FAX**



**Entry Rules:** All work must be framed (a finished appearance) and may not exceed 32" x 40" The work must be wired and ready for display. Gallery clips, unframes or any unstable framing cannot be accepted. Three-dimensional works may not exceed 20" x 40" x 14" and must be accompanied by an appropriate stand or pedestal. The identification tag should be attached to the back of each piece of art.

**Registration Deadline:** See website: [upwitharts.org](http://upwitharts.org) for current schedule.

**Drop off Artwork:** Saturday morning 9-11 a.m. Citizens Bank, 17 Pope Street, Hudson.

**Reception:** Thursday 5:30-7:00 p.m. Invite your friends and come for the party!

**Pick up Artwork:** Saturday 9-11 a.m. Citizens Bank, 17 Pope Street, Hudson. Please call to make alternate arrangements if this time is inconvenient. Work will be retained at the bank for one week beyond pick-up date and then becomes the property of the Arts Alliance.

If you have questions or want more information call 978-562-1646 Monday – Friday, 10 am - 4 pm.

**The Arts Alliance retains a 20% commission on any sales.**

Please attach an **IDENTIFICATION TAG** to the back of each piece you are entering.

The **ARTIST’S RECEIPT** is your verification of entered work.

**ARTIST’S RECEIPT**

**ARTIST’S RECEIPT**

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

TITLE: \_\_\_\_\_

PICK UP DATE: \_\_\_\_\_

PICK UP DATE: \_\_\_\_\_

**IDENTIFICATION TAG**

**IDENTIFICATION TAG**

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

TITLE: \_\_\_\_\_

TITLE: \_\_\_\_\_

PRICE: \_\_\_\_\_

PRICE: \_\_\_\_\_

HANGING # \_\_\_\_\_

HANGING # \_\_\_\_\_