



WILLINGBORO ART ALLIANCE 2017 Open Show at the Willingboro Library

November 1, 2017 to November 30, 2017

220 Willingboro Parkway, Willingboro Town Center, Willingboro NJ 08046
www.willingboroart.org

DATE: November 1 to November 30, 2017
PLACE: The Willingboro Library
220 Willingboro Parkway
Willingboro Town Center, Willingboro NJ 08046

ELIGIBILITY: This exhibition is open to all artists. Artists may submit two (2) original two-dimensional piece of work, fine art or photography. **Only 30 participants will be able to show, therefore you must call or e-mail Joy Hoffman to register your intent to be placed on the list by Saturday, October 14.**

There is a size restriction of no larger than 36 inches. Nudes will not be accepted.

All artwork must be for sale.

ENTRY FEE: \$5 per piece for WAA members; \$10 per piece for non-members. Make checks payable to Willingboro Art Alliance (Annual membership dues must be current).

CALENDAR - Willingboro Library

Register Intent:	Saturday, October 14
Submit <u>Completed</u> Form & Fee:	Saturday, October 21, 2017
Delivery of Artwork:	Wednesday, November 1, 2017 from 2 to 4 pm
Show Start Date:	Wednesday, November 1, 2017
Reception Date:	None
Show End Date:	Thursday, November 30, 2017
Pick up of Work:	Thursday, November 30, 2016 From 2 to 4 pm

Best of Show to be awarded

REGISTRATION: Complete the registration forms, attach labels to artwork. Send the File Copy and Artist Receipt to Joy Hoffman to prepare labels for the show, along with a check made out to WAA by October 21.

GUIDELINES: Submission to this exhibition is an agreement on the part of the entering artist to all of the conditions set forth in this prospectus. All work must be original, created SOLELY by the artist, no reproductions. Art works should be properly framed and wired for hanging. Accepted art may not be removed before November 30.

WILLINGBORO ART ALLIANCE (WAA) AND Willingboro Library WILL NOT BE RESPONSIBLE FOR LOSS OF OR DAMAGE TO WORKS.

Entries will be handled with all possible care, but those submitting will hold harmless the WAA and the Willingboro Library from all claims of damage that might arise from loss or damage to the works of art submitted to this exhibition from any cause whatsoever.

CONTACT INFORMATION

NAME:	Joy Hoffman
ADDRESS:	5 Shelter Rock Place
CITY:	Moorestown NJ 08057
PHONE:	(856) 234-1406
E-MAIL:	Joyke41@comcast.net

WAA Willingboro Library Show File Copy

Artist: _____ Phone: _____

Address: _____

City: _____ Zip: _____

E-mail Address: _____

Title: _____

Medium _____ Price _____

Title: _____

Medium _____ Price _____

I will not hold the WAA, sponsoring organizations or staff responsible for damages or losses.

Artist's Signature (Signature Constitutes Acceptance of all Guidelines.)

WAA Willingboro Library Show Artist Receipt

Artist: _____

Fee Paid: \$ _____ Initial: _____

Title: _____

Title: _____

ART LABELS: Attach to back of art, top right corner

WAA Willingboro Library Show Art Label

Name: _____

Phone: _____

Title: _____

Medium: _____ Price: _____

WAA Willingboro Library Show Art Label

Name: _____

Phone: _____

Title: _____

Medium: _____ Price: _____