

# 2022 Call for Art Submission Form

Name:
Address:
Telephone Number:
Title of Art (you must give your art piece a title):
Description of art:
Size:
Medium (Oil, Wood, etc.):
I agree that my art work is valued at \$ _____ (must be valued between \$1.00 and \$99.00). I agree to have my art work held by _____ for the juried art show, <u>if my piece is selected</u> , I will sell it to the Community Mental Health Association of Michigan as part of its Traveling Art Show VI.
X
Artist Signature
X
Witness Signature

\*Receiving staff must witness the receipt of art and provide a fully signed copy of the form to both the artist and the TBHS Director of Marketing and Training.

The TBHS Marketing and Training Consent form also needs to be signed.