

## Boyne Regional Library

15 1<sup>st</sup> Ave SW | Box 788 Carman, MB R0G 0J0 204-745-3504

## Art Display Application Form

Artist Name:	st Name: Preferred Exhibit Dates:	
Exhibit Name (if any):	Email:	
Address:	City:	Postal:
Home Phone:	Cell Phone:	
Guidelines:  a) The maximum dimensions for work ab Sculptures may be permitted but must advance. c) All work must be ready for hanging; fd BRL reserves the right to not display e) Artists are responsible for insurance of Neither the Boyne Regional Library not any loss or damage to any item(s) on display loss or damage to any item(s) on display insurance policy owned by the Boyne Regional Library reserves the logoneration of the Boyne Regional Library reserves the logoneration.	rames are not required. artwork for any reason. of their own work. or the Town of Carman shall assume isplay. The displayed item(s) are not regional Library or the Town of Carman shall assume item and to remote the items in the library and to remote the refuse any art. You will be considered.	ons and approved by BRL in e any responsibility or obligation for t and will not be covered under any nan. ove them as well.
Artist Signature:		Date:
Title:		
	Artist:	
Title:Medium:	Artist: Phone: Price/NFS:	
Title:	Artist: Phone: Price/NFS:	
Title:Medium:	Artist: Phone: Price/NFS: Artist:	
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www.boyneregionallibrary.com | carmanlibrary@outlook.com



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## Art Display Application Form Cont'd

Title:	Artist:	
Medium:	Phone:	
Dimensions:	Price/NFS:	
	Artist:	
Medium:	Phone:	
Dimensions:	Price/NFS:	
	Artist:	
	Phone:	
	Price/NFS:	
	Artist:	
	Phone:	
	Price/NFS:	
	Artist:	
Medium:		
Dimensions:	Price/NFS:	
	Artist:	
Medium:		
Dimensions:	Price/NFS:	
	Artist:	
Medium:		
Dimensions:	Price/NFS:	
Title:		
Medium:		
Dimensions:	Price/NFS:	