

ARTCITE - DTL 2017 SUBMISSION REGISTRATION

Please complete this registration form for proper identification and return of your submission(s). *Please attach separate DTL ID label to the back of each entry (handy labels at: www.artcite.ca).*

Please Print All Information

Name _____

Mailing Address (incl postal code) _____

Tel & email _____

I have read the DTL exhibition requirements and agree to the terms set therein.

Signature _____

Date _____

Submissions Information (max. 10 entries/artist)

Entry no. (do not fill in; for Artcite admin. only) _____

1. Title _____

Medium & date _____

Price _____

Entry no. (for Artcite admin. only) _____

2. Title _____

Medium & date _____

Price _____

Entry no. (for Artcite admin. only) _____

3. Title _____

Medium & date _____

Price _____

Entry no. (for Artcite admin. only) _____

4. Title _____

Medium & date _____

Price _____

Entry no. (for Artcite admin. only) _____

5. Title _____

Medium & date _____

Price _____

Entry no. (for Artcite admin. only) _____

6. Title _____

Medium _____

Price _____

Entry no. (for Artcite admin. only) _____

7. Title _____

Medium & date _____

Price _____

Entry no. (for Artcite admin. only) _____

8. Title _____

Medium & date _____

Price _____

Entry no. (for Artcite admin. only) _____

9. Title _____

Medium & date _____

Price _____

Entry no. (for Artcite admin. only) _____

10. Title _____

Medium & date _____

Price _____

Total sales: _____

less 30% Artcite commission: _____

Artists' commission owing: _____

For Artcite admin. use only: Membership current? Yes No Admin fee paid + method of pmt? _____ Membership fee paid \$ _____
& method of pmt (cash, cheque, visa) _____ Membership renewed to _____ date