

WRAP ENTRY FORM



Send to Coordinator

Please use online form at wiscartists.org if possible!

Name _____ Phone (____) _____ Email _____

Address _____ City _____ State _____ Zip _____

Regional WRAP you are entering: _____ First time attending a WRAP? ___ Yes ___ No

Artwork 1

Artwork 2

Artwork 3

Title			
Media			
Size *			
Price (or Not for Sale)			

*Size is height x width x depth to the nearest inch without frame

\$30.00 fee enclosed (Make check payable to the SPONSOR of the workshop). Rules of Entry: I have read the guidelines and certify that all my submitted work is ORIGINAL AND COMPLETED WITHIN THE PAST TWO YEARS. I am a NON-PROFESSIONAL ARTIST, 18 or older. I agree to provide the work(s) of art or other material identified above for display in the WRAP Exhibit. I agree to hold harmless AWA from any and all copyright violations and I release AWA, workshop sponsor(s) and coordinator(s) and the exhibit venue from responsibility for loss, damage, destruction or theft of work(s) while on display and/or while being shipped to or from the exhibit. The displayed works are not and will not be covered under any insurance or liability coverage applicable to the AWA, coordinator(s), sponsor(s) or venue. I understand that if I want insurance coverage, I am responsible for obtaining such coverage at my own cost for the work(s) being displayed.

Image Use Agreement

AWA and the exhibitor have permission to photograph & create digital images of me while attending the exhibit to use, copy, publish, distribute & otherwise reproduce for AWA purposes including but not limited to websites, publications & social media. ___ I accept ___ I do not accept.

Signature _____ Date _____

Identification Labels: Cut out or make facsimiles, and attach to back of artwork.



Name _____ Address _____ City and Zip _____ Title _____	Name _____ Address _____ City and Zip _____ Title _____	Name _____ Address _____ City and Zip _____ Title _____
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