

## TEAM KENTUCKY GALLERY EXHIBIT APPLICATION

Exhibit Dates: January 10 – June 30, 2024

Application Deadline: Wednesday, Dec. 20, 2023

Please read the prospectus for complete instructions and guidelines before applying online.

 $\textbf{PLEASE NOTE:} \ \textbf{While filling out the form below, DO NOT} \ press \ the \ Enter/Return \ key \ as \ this \ will \ submit$ 

the form prematurely.

CONTACT INFORM	MATION					
First Name:						
Last Name:						
Address:						
City:			State:		Zip:	
County:						
Preferred phone:						
Email:						
Website URL:						
ARTWORK ENTRY	•					
Title of artwork:						
Framed				Unframed		
Dimensions (in inch Enter number only DO NOT use quota Please include fran	ntion mark		ensions.			
	"H			"W		"D
Medium:						
YES, this artwor Retail price: \$	k is for sa	ıle				
NO, this artwork Insurance value (If						
ARTIST AGREEME	NT					
I agree I certify that I creat Policies. I agree to					with the Team Kentucky Exhibit cies.	
	Thank yo	ou for your inter	est in being a	a part of the Tea	m Kentucky Gallery.	

NOTE: You must **download** this form and press the Submit button to send it. Submitting will create an email where you can attach photos of your artwork. If you have issues, send form and photos to Sam.Devine@ky.gov.