



Artist Application and Agreement

Artist Name: _____
Business Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Mobile: _____ Email: _____
Website: _____ Facebook: _____ Twitter: _____

Media/Category:
____ Sculpture; Sculpture subcategories ____ Wood ____ Metal ____ Other ____ Jewelry
____ Fiber ____ Ceramics ____ 3 Dimensional Mixed Media ____ Painting ____ Photography

Description of Materials and Techniques/Artist Statement: (can attach separate 8.5" x 11" sheet)

Type of Display: Exhibiting Only _____ Exhibiting and Booth _____ Booth Only _____

Special requests: _____
Electricity needed - \$15.00 extra: yes no (must provide own extension cords)
Rentals - \$15.00 extra: Tables _____ Chairs _____
Texas Sales Tax Number: _____

I hereby agree to indemnify and hold harmless Clark Gardens Botanical Park, its agents, employees, volunteers or assigns, from all losses, costs, damages, expenses and liabilities caused by an accident or other occurrence of bodily injury to any person, or damage or destruction to real or personal property arising directly or indirectly from operations, products or services rendered under this contract.

I agree to abide by all exhibit terms, conditions and regulations as set forth in the Artist Information and Guidelines, a copy of which I have reviewed. This application is considered my commitment to exhibit at the 2012 Clark Gardens Spring Festival on March 30-April 1st. Upon acceptance, the booth and/or exhibit fee is due and payable by February 1, 2012. No refunds will be made available.

Fees will be refunded by April 5, 2012 if all terms of this application are upheld.

Submit this application, together with the required digital images and \$15.00 nonrefundable application fee.

Payment Options:

- Enclosed is my application fee of \$15.00
 - Check Number _____ (please make checks payable to Clark Gardens)
- Please charge my credit card \$15.00

Credit Card Type: Check one American Express Discover Visa Master Card
Card Number _____ Expiration Date: _____ Security Code: _____

Name on Card: _____

Billing Address for Credit Card: Street: _____ City, State, Zip: _____

Signature: _____