**Hampshire County Arts Council 2018 Spring Fine Arts Show**

Amt Paid \_\_\_\_\_\_\_\_\_\_\_

Check\_\_\_\_ Cash \_\_\_\_\_

Recd by \_\_\_\_\_\_\_\_\_\_\_\_\_

March 5 - 24

Hampshire County Public Library, Romney, WV

**Entry Form**

Artist Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bring entries, form, & fees to Hampshire County Public Library, Romney, WV, on 3/3/16 between 10:30 am and 3 pm. See *Call for Entries* document for rules.

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| --- | --- | --- | --- | --- |
| **Entry Number**(leave blank) | **Title** | **Media/Materials** | **Special Display Instructions** | **Price** |
|  |  |  |  |  |
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|  |  |  |  |  |

**Artist's Statement:** Please explain your artistic process in general or talk about the work(s) you submitted. You may attach a separate page if you need more room. This information will be used in publication(s) about your entries.

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**Certification & Agreement:** I hereby certify that I agree to the Show Rules as outlined in the *Call for Entries* document and that I will not hold the HCAC or Hampshire County Public Library responsible for any loss or damage to my entries. Pictures of my art may be used in ads and articles to promote the HCAC Fine Arts Shows.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Picked-up Artwork** : (Saturday, March 24, 2017, 10:30 am - 2 pm)

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_