

ARTIST APPLICATION FOR EXHIBITION  
 Return to: Gallery Director c/o Chico Art Center  
 450 Orange Street, Suite 6  
 Chico, CA 95928

Artist Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Website \_\_\_\_\_

Are you represented by a gallery?\* \_\_\_\_\_

Will you be available to attend the reception if given an exhibition? \_\_\_\_\_

How did you hear about us? (please circle)

Radio Newspaper Our Website Other \_\_\_\_\_

Brief description of work (e.g., bronze abstract sculpture, large-scale oils, etc.)

\_\_\_\_\_

List of Works Submitted - Ten numbered images (slides, photographs, or CD). Numbers on list should correspond to number on images. Digital prints acceptable. No videos or 3 ring binders.

Number	Title of Work	Size	Medium
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

**Each slide or photograph should be marked with artist name and an indicator for orientation (top).** Include a self addressed stamped envelope if you want images returned. For information call 530-891-5945 or visit our website at [www.chicoartcenter.com](http://www.chicoartcenter.com)

\*Chico Art Center will not split commission with another gallery or representing party