

Plymouth Center for the Arts
A Different Vision Exhibition

Registration Confirmation Form

Last Name:

First Name:

Town/City:

State:

ZIP or Postal Code:

Country:

Telephone #:

Artwork Title:

Price:

1. **Publicity:** By Entering your artwork in this show you are giving Plymouth Center for the Arts / Plymouth Guild, Inc. permission to use it in print, electronic, and other publicity media.
2. **Sale of Artwork:** The Plymouth Guild commission is 30% for members, and 40% for non- members.
3. **Return of Artwork:** Accepted work will be returned in new packing within 30 days of the Exhibition close. See separate shipping instructions for requirements.
4. **Release of Claim:** In consideration of the right to exhibit art work, the undersigned does hereby release and forever discharge the Plymouth Center for the Arts / Plymouth Guild, Inc., and their agents, servants, and officers from any and all claims and demands of every nature whatsoever.
5. It is also understood that the Plymouth Center for the Arts / Plymouth Guild, Inc. does not provide liability insurance to cover any loss, theft, damage, or destruction of property.
6. I understand that by exhibiting I assume all risk of loss.

Signature:

Please Print Name:

Date: