ART SHOW CONTROL SHEET **Loscon34**

PAGE # __OF __.

ARTIST'S #_____

LOCATION #_____

ARTIST'S NAME: _____

ADDRESS: _____

_____

_____

PHONE: _____

E-mail: _____

RELEASE ADDRESS IF REQUESTED? YES/NO

AGENT: _____

ADDRESS: _____

_____

_____

PHONE: _____

E-mail: _____

ACCREDITED PRESS PHOTOGRAPHY? YES/NO

PIECE #	TITLE OF PIECE {please type or print neatly)	Medium {please type or print neatly)	Print # (X of Y)	MINIMUM BID	Min. bid sale after close? Y/N

I have read and understand the "Rules and Information for Artists and Agents" for the Loscon34 Art Show:

Signature of Artist/Agent _____Date_____