



2017 MEMBERS SHOWCASE

ON VIEW: MAY 27-JUNE 25, 2017 • APPLICATION DUE: MAY 19
ELDERFIELDS PRESERVE • 200 PORT WASHINGTON BLVD. MANHASSET, NY 11030

CALL FOR ENTRIES The Art Guild of Port Washington (TAG) will hold its **2017 Members Showcase Exhibit**. All TAG members (14 years and older) are invited to enter their artwork. Non-members can become members at time of submission.

ELIGIBILITY All TAG members (14 years and older) may submit. Membership must be current. One entry per member. All styles are welcome. All works must be original and completed within the last five years. Works previously exhibited at The Art Guild Gallery will not be accepted. The Art Guild reserves the right to choose the artwork to be included in the exhibition. *Works to be included in this exhibition must be available from Monday, May 22 through Sunday, June 25, 2017.*

MEDIUMS Including but not limited to acrylic, oil, watercolor, pastel, mixed media, collage, photography, encaustic, etching/prints, or sculpture with pedestal. (NO COPIES, REPRODUCTIONS OR GICLEES.)

JUROR Dan Christoffel is an award-winning artist with fifty years teaching experience. His expertise extends from oil painting and sculpture (in terra cotta, stone and steel) to print making. He is an accomplished portrait artist and art lecturer including visiting lecturer at the Metropolitan Museum of Art in New York City. Committed to excellence in education, he has been a visiting artist at schools across Long Island, an adjunct professor and an artist in residence at LIU Post. He presently has two sculptures included in the 911memorial.org collection.

REGISTRATION & ENTRY FEE *Pre-registration is required! (Fees on the right.) You MUST pre-register no later than May 19.* Works will be accepted on a first come first served basis. There is no jurying-in process and no need to send us your images.

SIZE AND FRAMING Size, with frame, must not exceed 30" on the longest side. *Work should be cleanly matted and/or framed (if appropriate), wired securely for hanging, with the wire attached via screw eyes or D-rings to the frame, not the backboard. (Gallery wraps are acceptable.) No saw tooth hangers, no tape or string on the back.* Work must be labeled with the title (if any), artist's name, phone number, and email address.

DELIVERY OF ARTWORK Artwork is to be delivered on the dates indicated below. Please provide a typed bio or artist statement, printed on one side of an 8.5 x 11 sheet of white paper.

AWARDS 1st Place \$300 • 2nd Place \$200 • 3rd Place \$100 • Terri Shkuda Award \$100 • Honorable Mention certificates • Student Award (if applicable) will also be awarded.

SALES Artwork may be sold directly by the artist with a suggested donation of 20% of the selling price from the artist to The Art Guild. Note, however, that *sales may not be made at the exhibition.* All work must remain on view for the duration of the exhibit.

LIABILITY & INSURANCE The Liability Waiver on the entry form must be signed by the artist submitting images for consideration. It is the responsibility of the participating artist to insure or self-insure any work submitted for inclusion in this exhibit.

QUESTIONS Contact us at **516-304-5797** or **info@TheArtGuild.org**.

CALENDAR

- **FRIDAY, MAY 19:** Registration must be received.
- DROP OFF** *Entries must be delivered to The Art Guild, 200 Port Washington Blvd, Manhasset, NY 11030, at these times.*
- **SUNDAY, MAY 21:** 3:00 - 5:00 pm
- **MONDAY, MAY 22:** 5:00 - 7:00 pm

EXHIBIT

- **SATURDAY, MAY 27 - SUNDAY JUNE 25**
- Gallery open Saturdays & Sundays 1:00 - 5:00 pm & by appointment

ARTIST'S RECEPTION & AWARDS CEREMONY

- **FRIDAY, JUNE 2 : 6:00 - 8:00 pm**

PICK-UP

- **MONDAY, JUNE 26:** 1:00 - 6:00 pm
- **TUESDAY, JUNE 27:** 5:00 - 7:00 pm

MEMBERS SHOWCASE 2017

Office Use Only Date Paid: _____ Check: _____ Amount: _____

REGISTRATION IS REQUIRED!

Artists will be accepted on a first come, first served basis.
ONE (1) entry per Artist

[] \$30 for ONE adult entry • [] \$15 for ONE student entry

Register and pay at TheArtGuild.org with a credit card or PayPal
OR

fill out this form and mail with a check payable to THE ART GUILD to:
The Art Guild • 200 Port Washington Blvd. • Manhasset, NY 11030

ARTIST INFORMATION PLEASE PRINT CLEARLY

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Cell Phone _____

E-mail _____

Title _____

Medium _____ Height _____ Width _____ Value \$ _____

LIABILITY WAIVER

I wish to have The Art Guild of Port Washington, Inc., ("TAG") consider my artwork for exhibition as indicated in this Registration Form, and I acknowledge that TAG has the right, in its sole discretion, to choose the artwork to be exhibited. I also acknowledge that unrelated business or other activities may or will take place at the exhibition location during the exhibition and I assume any risk associated with such activities. I further acknowledge that I have been notified that I should carry my own insurance to be protected against loss, theft or damage to my artwork. I fully understand and agree that the following waiver, release and hold harmless agreement is binding on my heirs, assigns and legal representatives.

In exchange for TAG's consideration of my artwork, I agree to assume all risks of copying, theft, loss or damage to my artwork in connection with TAG's decision to exhibit or not exhibit my artwork or in connection with the exhibition of my artwork, for the duration of the exhibition from and including delivery to TAG, through and including pickup, and knowingly and intentionally release, discharge, hold harmless, and agree not to sue TAG, its officers, directors, members, committee personnel, agents or owners and/or lessees of the premises where the exhibition is held ("Released Persons") from any claim, that I may have or acquire in the future, arising out of my submission of artwork to TAG for its consideration for exhibition, for TAG's exhibition of my artwork, or while it or I am on the premises where the exhibition is held, for, including but not limited to, copying, theft, loss, or damage to my artwork, personal injury, or death, whether caused intentionally or arising from the negligence of any Released Person, or of any other person or any other cause, to the maximum extent permitted by applicable law.

Whether or not any artwork submitted by me is chosen for exhibition, I consent to The Art Guild's use of any artwork I submit (or an image representing such artwork) in connection with TAG's communications to prospective members, members and the public.

I have carefully read this waiver, release and hold harmless and fully understand its contents and agree and voluntarily sign below.

PRINT NAME OF ARTIST _____

SIGNATURE OF ARTIST _____ DATE _____

If the person whose signature appears above is under 18 years old, his / her parent or legal guardian must complete the following:

I (Print) _____
am the parent or legal guardian for the person whose signature appears above, and on his / her behalf, join in the above waiver, release and hold harmless. I have carefully read this waiver, release and hold harmless and fully understand its contents and agree and voluntarily sign below.

SIGNATURE OF PARENT OR LEGAL GUARDIAN _____ DATE _____

The Art Guild of Port Washington, Inc., is a 501(c)3 nonprofit organization providing encouragement, education and a forum for the appreciation of the visual arts. The Art Guild strives to offer residents from local and neighboring communities an avenue to broaden their creative pursuits.