

ARTIST APPLICATION

Detach and mail with payment and photos

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Daytime phone: (____) _____

Other: (____) _____

E-mail: _____

Web Site: _____

Tax ID #: _____

Please circle one of the following:

Acrylic & Oil Painting Watercolor & Pastel

Photography Wood

Sculpture (Clay, Stone or Metal)

Glass Mixed Media

*Plants *Jewelry, Musician* Fine Handcrafts*

Please log onto our website at www.pines.com for more information. The Jurying Board reserves the right to change your category if you do not adhere to the descriptions.

How did you find out about this event? _____

Interested in demonstrating? Y/N: _____

Release of Liability:

By my signature below, I understand and will comply with the Art Festival rules and certify that the above information is correct. I also hereby waive and forever release any and all rights and claims for injuries, loss or damage to property I may have against the City of Pembroke Pines.

Signature

Date

FREE AWARDS DINNER

PLEASE CIRCLE: Y / N

NUMBER ATTENDING: 1 / 2

FOR OFFICE USE ONLY:

Date Rec: _____ EI: _____ Receipt #: _____

Jury Check # _____ Booth fee Check # _____

Booth Fee Amount: _____ Booth #: _____ Packet Sent:

_____ Comments: _____

PLEASE NOTE; GENERATORS ARE NOT PERMITTED AT YOUR BOOTH!