

# Entry Form

Send this form, entry fee, photos or disc to:

ARTery Gallery, c/o New Visions, 210 Broad St. Milford PA 18337

Print name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

email \_\_\_\_\_

I agree to the conditions stated in the Prospectus:

Artist signature \_\_\_\_\_

## Gallery copy (do not detach)

send back to gallery

### Entry #1

Name \_\_\_\_\_

Title \_\_\_\_\_

Medium \_\_\_\_\_

Size \_\_\_\_\_

Price \_\_\_\_\_

### Entry #2

Name \_\_\_\_\_

Title \_\_\_\_\_

Medium \_\_\_\_\_

Size \_\_\_\_\_

price \_\_\_\_\_

### Entry #3

Name \_\_\_\_\_

Title \_\_\_\_\_

Medium \_\_\_\_\_

Size \_\_\_\_\_

Price \_\_\_\_\_

## Artists Copy clip and save this portion

attach to back of accepted artwork

### Entry #1

Name \_\_\_\_\_

Title \_\_\_\_\_

Medium \_\_\_\_\_

Size \_\_\_\_\_

Price \_\_\_\_\_

### Entry #2

Name \_\_\_\_\_

Title \_\_\_\_\_

Medium \_\_\_\_\_

Size \_\_\_\_\_

Price \_\_\_\_\_

### Entry #3

Name \_\_\_\_\_

Title \_\_\_\_\_

Medium \_\_\_\_\_

Size \_\_\_\_\_

Price \_\_\_\_\_