

IRVINGTON PUBLIC LIBRARY
12 South Astor Street Irvington, New York 10533
914-591-7840

APPLICATION FOR EXHIBITION

Artist's Name

Affiliation (if applicable)

Address

Home Telephone **Office**

Fax: Home **Office**

Title of Exhibition

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**Brief description of work and approximate number and sizes of pieces to be shown
(this information may be used for publicity purposes.)**

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Exhibit dates preferred: From: **To:**

From: **To:**

Recent or upcoming exhibitions in the vicinity:

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Please submit with this application:

1. Resume
2. Artist's statement of purpose
3. Slides and photographs of work to be exhibited (must include works from last 5 years).
4. Visit to artist's workplace may be requested.

At acceptance:

- 1. \$50.00 deposit will be required for exhibition space use.**
- 2. Signed Irvington Library Exhibition Agreement.**

I have received the Irvington Exhibition Policy statement and agree to the conditions and terms therein.

Signature **Date**