ARTGALLOP
GALLERY SHOP
3A Reservoir Road
Narre Warren North 3804
Tel: +61 (03) 87904756
rosmead@gmail.com
www.artgallop.net

APPLICATION TO EXHIBIT

Name ……
Address ……
……
Tel: ……
Email: ……
Exhibition Title:……
Date/Month ……

Gallery Hire Deposit Fee: $100 – SHARE. $300 – SOLO Paid in advance for one month.
Commission: 25%
Work must be insured by the artist.
A detailed price list must be made available with delivery of works.
Artist must help with advertising and the curating of exhibition.
Artist must arrange and supply catering for opening day.

I understand that neither Artgallop nor Ros Meadmore, gives any undertaking or warranty to any user of the venue as to suitability of the venue for the purpose that I as exhibitor envisage.
I agree to all of the above criteria.

…… ……
Print Name: Print name:

…… ……
Signed by artist: Signed by Gallery:

Date……..