

Artist Membership Screening Application

(Please Print)

Medium you wish to have screened: _____

Name: _____

Address: _____

City, State: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email address: _____

Have you belonged to a gallery before? ____ Was it a co-op gallery? ____ Gallery _____

Since 1973 volunteers have kept Quayside Art Gallery operating. In the truest spirit everyone must be willing to work for a co-op to be successful. We look forward to your commitment and your art if you join us.

Our Screening Director will contact you to set up an interview, complete your application, and accept your art work for screening. There is non-refundable \$25 Screening Fee to be paid at the time of this meeting. To be a displaying artist, you must live within a 60 mile radius of Quayside Art Gallery. If you have any questions please call Quayside Art Gallery at (850) 438-2363.

Applicants Signature: _____ Date: _____

Desk Workers (Full Name): _____

PENSACOLA ARTISTS, INC.

DBA Quayside Art Gallery

Screening for Artist Membership: Fill out the attached card and leave it with the front desk staffer. Retain this sheet to fill out at your convenience. As an Artist Member applicant you must live within 60 miles of Pensacola. The Screening Director will contact you to set up a time to submit your art for screening.

The Screening Director will notify you by email/phone of the Screening Committee's recommendation. Please allow at least 30 days for the screening process. If the Screening Committee does not approve your work, you may reapply for screening after 6 months and are entitled to a written critique upon request. Listed below are the requirements for Artist Membership.

- I agree to pay the one-time nonrefundable \$25 screening fee, collected when my "New Artist Membership Screening Application" (this sheet) and art work are left at the gallery for screening.
- All possible care will be taken to protect your artwork, however, P.A.I. and Quayside Art Gallery assume no liability for damages or loss. Any work left unclaimed at Quayside Art Galley for more than 30 days after notification of by screening chair will become the property of Quayside Art Gallery.
- I understand that if approved by the Screening Committee for Artist Membership, I will be required to work the front desk at Quayside Art Gallery one half a day each week or one full day every other week. I will arrive 15 minutes before the gallery opens and not closeout the end of day until posted closing time. There will be no double credit will be available until after the 48th month.
- I agree to participate in at least four (4) additional activities outside of normal business hours each year that promote the Gallery such as Gallery Night, Member Shows, Pensacola Fair Fine Arts Show, etc. and will attend at least three (3) of the six (6) membership meetings during the year.
- I recognize that our building has stairs and my work requirement will necessitate my ability to assist customers with work and other duties on the 3rd floor.
- I grant permission to Quayside Gallery to photograph my work for promotional/historical purposes.
- Framed work must use a stranded wire (coated or uncoated) with D ring or screw eyes, place 1/3 way down the edge and not too much slack so that it will hang properly with our Velcro hangers. All other work should be properly displayed for the medium.
- I agree to pay annual dues, payable July 1 each year. Our fiscal year runs July 1 to June 30. Initially, this fee will be prorated base on the month in which I joined. Additionally, when assigned a display space, I agree to pay on time the monthly display fee which is due by the 1st of each month. There is a \$100 initiation fee payable when signing the contract.
- I certify the artwork I have submitted for screening is entirely original, having been conceived and executed solely by me and is representative of the work I am currently doing. If accepted as an Artist Member, I will display only work which is original (not copied from any published work except my own) and only in the medium for which I have been approved.

I acknowledge that I have read, understand and agree to all of the above listed requirements.

Medium: _____

Artist Printed Name

Artist Signature

Street and City Address

State

Zip Code

()

Area Code

Phone Number

Gallery or Screening Director: _____ Date: _____ Screening Fee Paid: _____

Approved

Rejected

or asked to resubmit 3 new pieces