

**ARTS ON CITY WALLS  
2010 ART EXHIBIT APPLICATION FORM**



ARTIST'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**\*Please attach a bio about the artist and art work for promotional purposes.**

Artist's Medium:     Pastels                       Pencil Drawing                       Oils  
                                  Water Colors                       Acrylics                                       Photography  
                                  Pen & Ink                                       Collages  
                                  Other, explain \_\_\_\_\_

Number of pieces available for display: \_\_\_\_\_

What month do you prefer to display your artwork? (Prioritize your first 3 choices - 1 being first, 3 being last)

<input type="checkbox"/> <b>January</b>	<u>Full</u> April	<input type="checkbox"/> July	<input type="checkbox"/> October
<u>Full</u> February	<u>Full</u> May	<input type="checkbox"/> August	<u>Full</u> November
<u>Full</u> March	<u>Full</u> June	<input type="checkbox"/> September	<input type="checkbox"/> December

Would you be willing to hang with another artist?  Yes     No

Do you plan on having an open house?  Yes     No

Have you exhibited at the Art on City Walls program before?  Yes     No    \_\_\_\_\_ Year(s)

For 50 + Artists: Would you like to be considered to exhibit at the Senior Center? \_\_\_\_\_ Yes    \_\_\_\_\_ No

**Describe and title your exhibit:**

**\*\* NEW ARTISTS:** Please include sample photos (in electronic, slide or photo format) of your artwork with your registration form.

Fill out this form and return to:  
Lindsey Danhauser, Arts Coordinator,  
City of Eden Prairie, 8080 Mitchell Road, Eden Prairie, MN 55344.  
**REGISTRATION DEADLINE: November 13, 2009**