PROPOSED EXHIBITION APPLICATION

EXHIBITION TITLE:

ARTISTS' NAME:

ADDRESS:

PHONE: EMAIL:

WEBSITE:

THE APPLICATION MUST INCLUDE THE FOLLOWING:

THE ARTIST(S) CV
(PLEASE ATTACH A PDF DOCUMENT)

THE ARTIST(S) BIOGRAPHY
(MAX 200 WORDS, PLEASE ATTACH A PDF DOCUMENT)

ANY REVIEWS OR CRITICAL COMMENTARIES ABOUT THE WORK OR THE ARTIST(S)
(PLEASE ATTACH A PDF DOCUMENT)

EXHIBITION DESCRIPTION OR ARTIST(S) STATEMENT
(MAX 400 WORDS, PLEASE ATTACH A PDF DOCUMENT IF NEEDED):

CONT.

QUEENSLAND CENTRE FOR PHOTOGRAPHY - THE MAUD STREET PHOTO GALLERY, ABN 34540341733
6 MAUD STREET, NEWSTEAD, QUEENSLAND, PO BOX 198, NEW FARM, QUEENSLAND 4005, AUSTRALIA,
+61 (07) 32161727 MAUDCREATIVE@MAUD-CREATIVE.COM, WWW.MAUD-CREATIVE.COM

10 IMAGES OF PROPOSED/FORMER WORKS
(PLEASE EMAIL .jpeg or .tiff FILES)

HAS THIS WORK BEEN EXHIBITED BEFORE?
(CIRCLE WHICHEVER IS APPLICABLE) YES NO

IF YES, WHERE AND WHEN?

PROPOSED TIME FRAME/ PREFERRED DATES:

WORKS DETAILS:
(FOR EXISTING WORKS, PLEASE ATTACH DETAILED IMAGE LIST INDICATING TITLE, MEDIUM AND DATE OF COMPLETION OF EACH IMAGE)
(FOR UNFINISHED WORKS PLEASE ATTACH SOME PROGRESS IMAGES RELATING TO THE WORK)

PLEASE DESCRIBE THE FORM IN WHICH THE ART WILL BE DISPLAYED:
(i.e. FRAMED, UNFRAMED, MATTED, DIGITAL SCREEN, ETC.)

I ..... (the exhibitor) have read and understood the 'Terms and Conditions' as defined in the Terms and Conditions document and I agree to abide by the arrangements defined.

DATE: .....

SIGNATURE: .....

QUEENSLAND CENTRE FOR PHOTOGRAPHY - THE MAUD STREET PHOTO GALLERY, ABN 34540341733
6 MAUD STREET, NEWSTEAD, QUEENSLAND, PO BOX 198, NEW FARM, QUEENSLAND 4005, AUSTRALIA,
+61 (07) 32161727 MAUDCREATIVE@MAUD-CREATIVE.COM, WWW.MAUD-CREATIVE.COM