



NATIONAL JURIED EXHIBITION, 2017

"Sky"

June 2-July 22

ENTRY FORM - 122315

Must be Postmarked by Friday, March 3

**** Artists must be 18 year old to participate**

Please Type or Print

How did you hear of us?

CONTACT INFORMATION

Artist Name: _____

Address _____

City: _____ State _____ Zip _____

Email: _____ Tel: _____

Artist Website: _____

ENTER ARTWORK:

Only two-dimensional, or relief, original Artwork by the Artist will be accepted. Art must be ready to present; wires for hanging only. No sawtooth hangers.

PREPARE JPEG/S on a CD as follows:

1. **Image Entries should be sent as Jpegs:** 300dpi, and between 4 and 8MB.
2. **Title and number each Entry File:** First two letters of Artist's First and Last name, underscore, EntryNumber, underscore, TitleofArt (no spaces): Ex: Anne Baker submits "Green Hills" and "Horizon"
Entry #1 File Name: AnBa_1_GreenHills; Entry #2 File Name: AnBa_2_Horizon
3. **If you would like the CD returned:** include a self-addressed/ stamped envelope, and *circle:* YES
4. **Optional Artist Statement** (per entry; 150-word max): include on CD as a .doc or .docx file
5. **Artwork:** will be disqualified if its quality is not up to par with jpeg entry.

ARTISTS MAY ALSO SUBMIT ENTRIES THROUGH EMAIL AT: director@tiogahistory.org

COPYRIGHT

By Submitting artwork, the Artist guarantees copyright ownership is that of the Artist and grants THM the right to use accepted artwork for publicity purposes; the Artist will retain copyright of his or her artwork.

INSURANCE

THM will not be responsible for damage of artwork to, and from, the museum. Insurance during transit is that of the Artist. THM will insure the artwork against loss or damage while the artwork is in the museum.

JURORS

The artwork will be juried by a panel of three judges. (For more information: www.tiogahistory.org)

NOTIFICATION

Artists will be notified by Tuesday, April 11 if one or more artworks are accepted.





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ARTWORK - ENTRY INFORMATION

Entry #1/ File Name: _____

Title: _____

Medium: _____

Size: _____

Date completed: _____ Insurance Price _____

Entry #2/ File Name: _____

Title: _____

Medium: _____

Size: _____

Date completed: _____ Insurance Price: _____

Entry #3/ File Name: _____

Title: _____

Medium: _____

Size: _____

Date completed: _____ Insurance Price: _____

ENTRY FEE: (Non-refundable)

\$25.00 for up to three (3) images entered for possible inclusion in the exhibition.

Make checks payable to: Tioga History Museum

For credit card payments, call the Museum: 607.687.2460

MAIL: 1. Entry Form, 2. CD of Jpegs, 3. Entry Fee, 4. (optional) Artist Statement/s as .docs on CD, to:

Tioga History Museum
110 Front Street
Owego, NY 13827 USA

OR

Send artwork/forms and submit to:
director@tiogahistory.org

ACCEPTANCE OF TERMS:

I agree to all of the provisions of submission as stated herein in the Call for Entries/ Prospectus and Entry Form.**

Artist Signature: _____ **Date:** _____

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