Clearwater Art Walk 2024 *Sampler* Registration

Name_____ Phone _____

Address_____
E-mail: _____ Alt Phone:_____

What do you wish to display? (ie: painting, drawing, sculpture) _____

Is the piece your work? No

If not yours, who's?_____ Relationship? _____

Do you wish to display name of the artist? No
Do you wish a bio displayed with work? No If yes:

_____
_____
_____
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_____

I, _____, understand that the owner of the business, The Clearwater Art Walk, The Clearwater Community Foundation, and The City of Clearwater are in no way responsible for any damage that may occur while setting up, tearing down and during the Clearwater Art Walk. I understand that it is my responsibility to pick up my display piece by 9:30 pm the night of the Clearwater Art Walk or by noon the following business day. I understand that pictures of me and/or my display piece may be used on the website, social and other media for promotion of The Clearwater Art Walk.

_____ Date_____

Mail this form to Tricia Nichols, Clearwater Art Walk, 300 S. First, Clearwater, KS 67026
or e-mail with "Sampler Registration" in the subject line to: clearwaterartwalk@gmail.com.
If possible, please include a sampling of your work.