APPLICATION FOR EXHIBIT SPACE at the PLYMOUTH PUBLIC LIBRARY

Name: __________________________________________________________
If Applicable/Organization Name: ___________________________________
Address: _______________________________________________________
City/State/Zip: __________________________________________________
Email Address: ___________________________________________________
Telephone Numbers  Day:________________ Evening:____________________
Check one:  ____ Individual Show  ____ Group Show

QUALIFICATIONS (Use another sheet of paper if necessary.)
Provide a brief background, qualifications (e.g. memberships/awards), history of prior exhibits.
Attach examples of artwork to be exhibited or provide website, CD or flashdrive.
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

You must completely fill out this section for your application to be considered.

PROPOSED EXHIBIT
Title and Theme Optional: ____________________________________ Media:
Approx. number of items: __________________ Approx. size of items: ________
If group show, number of exhibitors: _____________________________
Please attach a listing of the exhibitors.

Month and Year desired (include alternatives): _______________________

LIBRARY SPACE PREFERRED
Please note that preferences will be honored only if space is available; otherwise assignments will be offered based on display space available, the number and size of your items.

1st Floor:  ____ Alcove  ____ Under Staircase  ____ Along Staircase
2nd Floor:  ____ Top of Staircase (Left & Right)

Applicant must sign below for exhibit applications to be processed. Return original to Anne C.
Phelan, Plymouth Public Library Corporation, 132 South Street, Plymouth, MA 02360

Waiver: I have read and accept the terms of the Plymouth Public Library Corporation Exhibit Policy. I (and/or my organization) will abide by the PPLC Guidelines. I (and/or my organization) understand/understands that the exhibitor assumes all the risks for damage to, loss of or theft of any item, artwork or any part of the exhibit.

I understand that 10% of the proceeds of sales resulting from my exhibit at the Plymouth Public Library will be donated to The Library within 30 days of the close of my exhibit.

Signed: ___________________________ Date: _________________________

STAFF USE ONLY
Date Approved: ______________________ Date Artist/Exhibitor Notified: ____________
Month & Location of Show: __________________________________________