Request for Proposal for Wilson Gallery Exhibitions for 2019-20

Submission Deadline: Friday, March 15, 2019

PLEASE PRINT

Name: (Individual or Group) ____________________________________________

Contact Person: (if different from above) _________________________________

Address: ____________________________________________________________

City: ____________________________ State: __________ Zip: ________________

Phone: __________________________ Fax: _________________________________

e-mail address: ________________________________

1. Provide brief biographical information about the artist(s). Include education, awards, exhibit history, other experience (or attach a resume)

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2. Type of Exhibit (original paintings, photographs, sculpture, mixed works)

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3. Suggested Title of Exhibit

____________________________________________________________________

4. Briefly describe the proposed exhibit. Comment on artistic method, style, size of work, number of works etc.  (Do not describe each individual piece)

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5. Please provide an artist’s statement. 
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________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
6. Has this proposed exhibit been shown elsewhere?
Where? ___________________________________________________________________
When? ___________________________________________________________________

7. When will this exhibition be available? ______________________________________

8. Have you ever had an exhibit at the Wilson Gallery, either individually or as part of a
   group show? _____ If so, when? ______

and briefly describe the previous exhibit: ______________________________________
________________________________________________________________________
________________________________________________________________________

9. Additional information or comments
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Submit this proposal and seven (7) to ten (10) images that are representative of the work to be
exhibited to the mailing address on the first page or electronically to artgallery@lemoyne.edu by
noon on Friday, March 15, 2019. (If using print photos or CDs and wish them returned to you,
include a stamped self-addressed envelope.)

The Wilson Gallery will cover limited post card printing, but not mailing costs. Artists may
request more post cards at their own expense. A small number of 11 x 17” posters will also be
provided by the College. Refreshments for an opening reception are provided as well.

The artist is responsible for transport of artwork both to and from the gallery.

A member of the Gallery committee will contact you with details regarding the committee’s final
decision. Thank you for your interest in exhibiting at the Wilson Art Gallery.

Signature: ________________________________ Date: _________________