



Application to Exhibit in the Annual Members Show
“Water”

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Please provide the following information for each item submitted
Title (if applicable) or description (if not titled) and medium.

Entry#1

Title _____ \$ _____

Medium _____

Entry#2

Title _____ \$ _____

Medium _____

I agree to the terms set forth by the Call to Entries form. I give
permission to take and use photos of my work for marketing purposes in
print and online.

Applicant Signature

Date

On the Hill Gallery 402 Main Street Yorktown, VA 23990 757.369.1108
Yorktownartsfoundation@gmail.com