

Harbour View Gallery Extended Artist Application

5789 Cape Harbour Drive Unit 103-104, Cape Coral, FL 33914 Phone: 239-540-5789
Email: art@harbourviewgallery.com Website: www.harbourviewgallery.com

Name: _____

Address: _____

Telephone: _____

Email: _____

Website: _____

Please include with this application:

- ∞ Five images of your current work: (either as an email attachment; on a cd or color photographs of your current work)
AND
- ∞ Current resume or biography

Please describe the medium, size, and price of each piece. Number each image to correspond to the description below.

1. _____ Medium ____ Size ____ Price ____
2. _____ Medium ____ Size ____ Price ____
3. _____ Medium ____ Size ____ Price ____
4. _____ Medium ____ Size ____ Price ____
5. _____ Medium ____ Size ____ Price ____

How did you hear about the gallery? _____

Other locations where your art is displayed? _____

New artists are selected by the gallery managing members. If additional information is needed you will be contacted to bring representative samples of your artwork.

Artist Signature: _____ Date: _____

Thank you for your interest!