



**ENTRY FORM –
JUDGED and NON- JUDGED EXHIBITS**

ARTIST'S NAME: _____

ARTIST'S ADDRESS: _____

E-MAIL: _____ PHONE: _____

TITLE AND DATE OF EXHIBIT: _____

I UNDERSTAND THAT THE CABARRUS ART GUILD OR CLEARWATER ARTS CENTER & STUDIOS ARE NOT TO BE HELD RESPONSIBLE FOR ANY DAMAGE TO OR LOSS OF ARTIST'S PROPERTY OR ANY PERSONAL INJURY INCURRED WHILE VISITING THE CLEARWATER ARTS CENTER & STUDIOS.

SIGNED: _____

DATE: _____

<u>Entry #1 Title:</u>	<u>Medium:</u>	<u>Price:</u>
<u>Entry #2 Title:</u>	<u>Medium:</u>	<u>Price:</u>
<u>Entry #3 Title:</u>	<u>Medium:</u>	<u>Price:</u>
<u>Entry #4 Title:</u>	<u>Medium:</u>	<u>Price:</u>
<u>Entry #5 Title:</u>	<u>Medium:</u>	<u>Price:</u>