

CITY OF MORGAN'S POINT RESORT ANNUAL LIBRARY ART EXHIBITION



8 Morgan's Point Blvd.
Morgan's Point Resort, Texas
76513-6438
Phone (254) 780-1334
Fax (254) 780-9238
Email- website.info@mprtx.us



ARTIST REGISTRATION FORM

Please submit your entry application using the form below. Our committee will contact you within two weeks. Artists chosen by the review panel will be curated into the exhibition schedule. There is no insurance for objects installed for exhibition; however, every precaution is taken to ensure the safety of the artwork. Program is open to all ages. Alcohol will be served during the event. All children under the age of 21 must be accompanied by an adult. If applying as a group, please submit only **one** application. Only the submitting artist will be notified via email. Please indicate the participating artist's name in the appropriate box.

Date/Time: November 9, 2019 from 6-9 pm

Location: Morgan's Point Event Center
60 Morgan's Point Blvd, Morgan's Point Resort, TX 76513-1334

Application deadline: November 1, 2019 by 6 pm

Artwork drop off: November 7 & 8, 2019

Drop off location: TBA

Please fill in all appropriate boxes in the application. Children under 18 must submit the parent/guardian consent form along with the application.

Additionally, we will conduct poetry readings throughout the evening. If you wish to read your authentic writings, visit the sign-up table upon entering the Event Center.

Artwork that can hang on the wall must have a hanger on the back that can be suspended on the wires that will be strung on the wall. Please include a short description of your work so that the audience will have some understanding of the art.

If you have any questions regarding the application or the event, please contact Andrew Bill, the Program Coordinator at andrew.bill@mprtx.us

ARTIST'S REGISTRATION FORM

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Artist's Name:
LAST
FIRST
MIDDLE

Address:.....

City:..... State:..... Zip Code.....

County:..... Date of Birth:..... Age:.....

Artist's phone number:.....

E-mail address:.....

Website:.....

Please indicate the discipline.

- (D01) Visual Arts
- (D02) Design Arts
- (D03) Crafts
- (D04) Photography
- (D05) Media Arts

Media

- | | |
|-----------------------|--------------|
| Painting - fine art | Clay |
| Painting - decorative | Sculpture |
| Photography | Music |
| Leather | Toys |
| Drawing | Fiber |
| Paper/Mixed Media | Metal |
| Glass | Paper |
| Wood – furnishings | Jewelry |
| Wood - decorative | Floral |
| Calligraphy | Other- |
| Ceramics | Other-..... |
| Pottery | |

Artwork Description:

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Please indicate the co-owners/group members of the work (if any):

Name	Email

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I,, confirm that this artwork is my own work, or my group's own unique group assignment. I acknowledge that copying someone else's artwork, or part of it, is wrong, and that submitting identical work to others constitutes a form of plagiarism.

.....
Signature

.....
Date

PARENT CONSENT FORM

Name of Child: **Date of Birth**

Parent/Guardian:

Address: **Zip Code**

Tel (day): **Tel (evening):**

Mobile: **E-mail:**

Does your child suffer from any medical conditions/allergies that the program should be aware of (including any current medication)?

.....
.....

Please provide details of medication that must be administered:

.....
.....

Emergency contact details: (If different from above)

Name: Telephone No:.....

Relationship to child:

CONSENT (please read carefully) please add any additional statements.

- a) I agree to my son/daughter taking part in the activities of the program.
- b) I confirm to the best of my knowledge that my son/daughter does not suffer from any medical condition other than those listed above.
- c) I consent that the program is not responsible for any means of transportation.

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- d) I understand that programs activities include a photography and film component in which my child will be both photographed and a photographer. I understand that these images will be part of a final exhibit, future programming, and press related to the art show.
- e) I understand that my child will not be supervised by program's organizing team throughout the event, and it is my responsibility to supervise the child for safety.

Signed (Parent/ Guardian) Date: