PUBLIC ARTS COMMISSION ARTIST REGISTRATION FORM

Contact Information:		
First Name		
Last Name		
Title		
Company Name		
Street Address		
Apt/Suite/Office		
City	1	
State	1	
Postal Code		
Country]	
Email Address		

Phone Number	
Fax Number	
Mobile Phone	
URL	
4. References: (Require	red)
	(Empty)
Name	
Organization	
Phone	
Name	
Organization	
Phone	
Name	
Organization	
Phone	
5. Receipt of Honors a	nd/or Awards (List):
5. Receipt of Honors an	Id/Of Awards (List).

8. List of Art Exhibits Represented by Art Galleries, Museums, Juried Art Exhibits, Bonafide Art Festivals, Corporate and Private Collections, Commercial Sales and Other Avenues for Professional Display (Required) 1			
Festivals, Corporate and Private Collections, Commercial Sales and Other Avenues for Professional Display (Required) 1			
2. 3. 4. 5. 9. Have you had artwork exhibited in public places? (Required) Yes			
3. 4. 5. 9. Have you had artwork exhibited in public places? (Required) Yes			
4			
5.9. Have you had artwork exhibited in public places? (Required)Yes			
5.9. Have you had artwork exhibited in public places? (Required)Yes			
9. Have you had artwork exhibited in public places? (Required) O Yes			
○ Yes			
10. If "yes" to Question 9, please list locations:			
(Empty)			
Location (City/State)			
Type of Art			
Location (City/State)			
Type of Art			
Location (City/State)			
Type of Art			
Location (City/State)			
Type of Art			

11. Please list the primary medium/matrial used in your art: (Required)	
☐ Painting	
☐ Sculpture	
☐ Engraving	
Frescos Stained Galss	
☐ Mosaic	
☐ Tapastry	
☐ Photography	
☐ Video	
☐ Fountains	
☐ Kinetic Art	
☐ Functional Furnishings	
Landscape/Landform	
☐ Other	
12. If "other" in Question 11, please describe:	