Exhibit Application for the Gibby Gallery

***Name of Exhibit:*** *\_\_\_Fantasy, Exploring the Vivid Imagination\_\_\_\_\_\_* ***Dates:*** *\_March 5-28\_\_\_*

**Application Due Date:** \_\_\_\_February 21\_\_\_\_\_ **Reception:** \_\_\_March 13, 6-8:00 pm\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Drop off Date & Time:**  \_\_February 28, 29, 12-5:00pm\_\_\_ **Pick up date & Time:** \_\_\_March 29, 1-3:00pm\_\_

**Eligibility and Selection**: Artists working in any medium may apply and all submissions will be reviewed by the Gallery Committee. The number of pieces for each artist to display will depend upon a number of factors. Hudson Contemporary will notify each artist of its decision shortly after the application due date. Exhibits may also include 3-D pieces. Call Caroline Zeitler with any questions, 302-757-2701.

**Artwork:** Works must be original, thoroughly dry, and ready for display. No giclee, laser or offset reproductions may be submitted other than original artist’s prints which must be submitted as a printmaking media original. Two-dimensional art must be suitably framed and wired with wire ends taped. ***No single or double saw-tooth hangers are permitted.*** All artwork must have a label with the artist’s name and phone number, medium, title of piece, price, and dimensions. Sculpture and 3-D works should come with their own stand if required. Some stands may be available. Artwork that has been shown in the Gibby facility within the last three years is not acceptable.

**Terms**: The application fee for submission of applications is $15 for up to 3 pieces and $5 each thereafter. The commission retained by Gallery is: 25% for volunteering participants, 35% for nonvolunteering participants. Volunteering requirements are 6 hours per month for discount.

All sales of the listed artwork will be handled by Gallery during the consignment period (from drop off to pick up). If Artist sells a listed piece outside of Gallery during the consignment period, Gallery is entitled to full commission. A copy of the contract is available for additional details. Full time students are exempt from fees.

**Proposal Requirements**: Proposal requirements are listed below.

 Inventory sheet.  Entry fee. Checks may be made out to The Everett, Inc.  Image(s) of artwork. Digital images may be submitted by email.  Artist’s statement and/or short biography, if we do not have it on record.

Please mail the information to: The Gibby Center, 45 W. Main St., Middletown, DE 19709, attention: Gallery Committee, deliver directly to the Gibby Center at 51 W. Main St., Middletown, or email to gibby.center@yahoo.com.

**For accepted artwork please fill out labels and attach to the back of artwork or attach artist labels.**

Artist: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_(h)\_\_\_\_\_\_\_\_\_\_\_\_\_(c)

Medium: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dimensions: \_\_\_\_\_\_\_\_\_\_\_\_Price \_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Received: \_\_\_\_\_ Date Returned: \_\_\_\_\_\_

Artist: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_(h)\_\_\_\_\_\_\_\_\_\_\_\_\_(c)

Medium: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dimensions: \_\_\_\_\_\_\_\_\_\_\_\_Price \_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Received: \_\_\_\_\_ Date Returned: \_\_\_\_\_\_

Artist: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_(h)\_\_\_\_\_\_\_\_\_\_\_\_\_(c)

Medium: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dimensions: \_\_\_\_\_\_\_\_\_\_\_\_Price \_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Received: \_\_\_\_\_ Date Returned: \_\_\_\_\_\_

Artist: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_(h)\_\_\_\_\_\_\_\_\_\_\_\_\_(c)

Medium: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dimensions: \_\_\_\_\_\_\_\_\_\_\_\_Price \_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Received: \_\_\_\_\_ Date Returned: \_\_\_\_\_\_

**gilbert w. perry, jr. center for the arts  51 W. Main St.  Middletown, DE 19709  302-444-0332**

Owned and operated by Everett, Inc., a 501 (c)(3) corporation.

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Upon acceptance this inventory sheet becomes part of the agreement between

Everett Inc. and the artist.

**Inventory Sheet for***: Fantasy, Exploring the Vivid Imagination\_\_*

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Artist use**  **Gallery use**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Item No. | Title  of Work | Medium | Size | Retail  Price | Approved  Y or N | Recv’d  **date init.** | | Returned  **date init.** | | Date  Sold  Invoice # |
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Entry Fee: Amount\_\_\_\_\_\_\_\_\_\_\_\_ Cash Check, #\_\_\_\_\_\_\_\_\_ Visa/MC, approval # \_\_\_\_\_\_\_\_\_

I have read and agreed to the terms and conditions of the document, Exhibit Application.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Artist Name (print) Date Artist Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Gallery Representative (print) Date Gallery Representative Signature Date

PROCEEDS FROM SALES

Total # Pieces: \_\_\_\_ Total # of Pieces Sold: \_\_\_\_ Total volunteer hours: \_\_\_\_ Commission:\_\_\_25% \_\_\_35%

Total Sales Amt.: $\_\_\_\_\_\_\_\_\_\_\_ Due to Artist: $ \_\_\_\_\_\_\_\_\_\_\_ Initials: Gallery Representative Artist \_\_\_\_\_\_

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