



## KALEIDOSCOPE 2017

# 2017 ARTIST APPLICATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

Please read Information for Artists and sign the Artist Release Form

1. Title of Work \_\_\_\_\_ Medium \_\_\_\_\_  
Size \_\_\_\_\_ Starting Bid Price \_\_\_\_\_

2. Title of Work \_\_\_\_\_ Medium \_\_\_\_\_  
Size \_\_\_\_\_ Starting Bid Price \_\_\_\_\_

3. Title of Work \_\_\_\_\_ Medium \_\_\_\_\_  
Size \_\_\_\_\_ Starting Bid Price \_\_\_\_\_

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Please make a copy of the above form and attach an ID slip on the back or bottom of all art work submitted. Mail a completed copy of the application form, the release form, and a check to JCAC, PO Box 598, Jefferson, Ga 30549. For more information call Teddie Lohmeier, 706-338-9316.