



Featherstone Center for the Arts

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ARTWORK SUBMISSION FORM

SHOW: THE ART OF FLOWERS

SHOW DATES: May 5 - 26, 2024

Please PRINT and fill out completely even if you think we have the information!

Artist's Name: _____

Mailing Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

E-mail Address: _____

Medium	Title of Work	Price

I have read and agree to the Gallery Guidelines.

Artist's Signature: _____

Pick Up Date: Tuesday & Wednesday, May 28 & 29: 10AM-4PM

For office use only (below)

Total Amount Sold = _____

Artist 60% = _____

Gallery 40% = _____