

ARTS ON MAIN GALLERY MEMBERSHIP APPLICATION

Please complete the following questionnaire in detail:

Date: _____

Name: _____

Address: _____

Phone number: _____

Email: _____

Your website: _____

Social Media: _____

Description of your work (please be specific):

Names/dates of Juried Show(s) in which you were accepted:

Detail Memberships in art organizations, gallery representation, and exhibitions within the past 3 years:

Please include the following with this complete questionnaire:

- . digital images of your current work (specifically representative of the work you wish to show in our gallery) or your website.
- . A brief artist statement

Please submit your application by email to: info@artsonmaingallery.ca

Include MEMBERSHIP in the subject line.

Please note: If you are accepted as a member, through our jurying process, you are agreeing to one full year commitment.

Name (please print): _____

Signature: _____

Revised Jan 1, 2024