



Sussex County Arts & Heritage Council

Show Us Your Best (Members Exhibit)

Exhibition Runs May 17, 2022 to June 23, 2022

This is a creative individual's time to shine! One that gives each artist the freedom to choose work that doesn't fit into any particular category, subject or medium. This exhibit allows the artists the opportunity to "Show Us Your Best". Wow us with your best work!

This exhibit is open to members and artists who become members.

For SCAHC membership information please call 973-383-0027 or visit our website www.scahc.org.

Gallery Policies

- Entries must be labeled on back with artists name, title, media, size & price.
- Artwork must be family friendly.
- Hanging work must be framed and wired ready for secure hanging — *no saw tooth hangers.*
- Artists supply their own pedestals for 3-D work.
- All entries must be the work of the artist
- SCAHC retains a 25% commission on all sales. Please consider this when determining your selling price.
- If not for sale mark "NFS" but include a declared value.
- The council collects sales tax on all orders.
- SCAHC has the right to decline, at any time, any work that is deemed inappropriate for this event.

Please contact SCAHC with any questions.

Important Dates

Artwork Drop-off:

Friday, May 13, 11 am to 4 pm
and Saturday, May 14, from 1 pm to 4 pm

Exhibit open to the public:

May 17 through June 23, - normal gallery hours

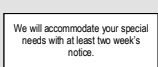
Artwork Pick-up:

Friday, June 24, 11 am to 4 pm
and Saturday, June 25 from 1 pm to 4 pm

Entry Fees:

- SCAHC member artists -
\$10 per piece or
\$25 for 3 pieces
- Portfolios: \$10. for member artists exhibiting 3 pieces of art in the current exhibit.— 20 portfolio pieces wrapped in plastic (*Portfolio display rack no larger than 30" x 30" footprint provided by artist*) (Portfolios must be removed at the end of the exhibit. Any portfolios including the stand and its contents not collected by the artists after four weeks from the pick up date become the property of the Council.)

Sussex County Arts and Heritage Council / 133 Spring Street, Newton, NJ 07860 • 973-383-0027
Tuesday - Friday 10 am - 5 pm / Saturday by appointment



Funding of the Sussex County Arts & Heritage Council has been made available in part by the NJ State Council on the Arts/Department of State, a Partner Agency of the National Endowment for the Arts, through the State/County Partnership Block Grant Program, as administered by the Sussex County Arts & Heritage Council. Additional funding has been made available in part by the New Jersey Historical Commission through the County History Partnership Program, as administered by the Sussex County Arts & Heritage Council. Partial funding provided by the Sussex County Board of County Commissioners..



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Artist _____ Phone _____

Address _____

State _____ Zip _____ Email _____

Entry # 1

Title _____

Medium _____

Size Length _____ Width _____ Height _____

Price (Includes 25% commission) _____

Entry # 2

Title _____

Medium _____

Medium _____

Price (Includes 25% commission) _____

Entry # 3

Title _____

Medium _____

Medium _____

Price (Includes 25% commission) _____

Portfolio Pieces

*** Please attach inventory list with your name, title of work, size, & price for each piece _____**

For member artists exhibiting 3 pieces of art in the current exhibit.— Up to 20 portfolio pieces wrapped in plastic (Portfolio display rack no larger than 30" x 30" footprint provided by artist) (Portfolios must be removed at the end of the exhibit.)

Entry Fees:

- **SCAHC member artists - \$10 per piece or \$25 for 3 pieces**
- **Portfolios: \$10. for member artists exhibiting 3 pieces of art.**

By entering this exhibit I agree to abide by the gallery policies. and to hold harmless SCAHC, and all their agents, officers and employees from any claims of damage or loss that might occur to works of art submitted for this exhibition. SCAHC does not insure exhibited art. It is recommended that artists have their own insurance. My art maybe used for advertising and/or promotion.

My art may be used for advertising and/or promotion.

Signature _____

Payment: Cash Check Credit Card

Amount \$ _____

Received by: _____

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