

**SPOTLIGHT ROOM / FEATURE WALL INTAKE INVENTORY FORM**  
**Exhibitor Agreement**

ARTIST'S NAME: \_\_\_\_\_ ARTIST CODE: \_\_\_\_\_

Show Dates: \_\_\_\_\_

Intake Date: \_\_\_\_\_ Time: 10am - 2pm Pickup Date: \_\_\_\_\_ 11am - 2pm

**Please read and complete this intake form and bring it with you when you submit your work.**

It is recommended that you make a copy for yourself so when you pick up your work it is easier to check your inventory and assure that all works are accounted for.

Check the Gallery periodically if you wish to replace items that have been sold. A new intake form must be completed for each show. Bring your business cards if you wish buyers to receive your contact information.

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I agree that the Mountain Artists Guild, Inc. will retain 25% of the sale price of any artwork sold (members), or 40% (non-members). I further agree that any sale of my work resulting from referrals from the Gallery or contacts made through the Gallery are subject to a commission of 10%. Payment on items sold will be sent to members via USPS within the first week of the month following the sale. **If a Non-Member is exhibiting artwork that is sold, payment will be made to the Member who contracted for use of Spotlight Room and payment to the Non-Member for artwork sold is solely between the Member and Non-Member.**

I agree to remove unsold work from the gallery on the pickup date shown above. If that is not possible, I will CALL MAG to arrange pick-up. I agree that work left 30 days beyond the pickup date becomes the property of The Mountain Artists Guild, Inc.

I understand that The Mountain Artists Guild, Inc. will assume no liability for loss through theft, or damage to my work. I hereby release The Mountain Artists Guild, Inc., its Staff, Volunteers, and Directors from any responsibility, personal liability or claims for loss or damage arising from my participation in an exhibit in the Gallery.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_

Name(print) \_\_\_\_\_ Email \_\_\_\_\_

Address/City/Zip \_\_\_\_\_

Received by (Staff): \_\_\_\_\_ Date: \_\_\_\_\_

**Revised 12/24**



