

CITRUS WATERCOLOR CLUB ART SHOW

PLACE: _____ DATE: _____

NAME _____ (Please bring SASE)

PHONE NO. _____ EACH PAINTING MUST HAVE YOUR NAME AND A NUMBER!

FRAMED ORIGINAL WATERCOLORS FOR HANGING: No frames in browse boxes please!

SIZE	NAME	PRICE
1	\$.....
2	\$.....
3	\$.....
4	\$.....
5	\$.....

SHRINK WRAPPED PAINTINGS:

SIZE	NAME	PRICE
1	\$.....
2	\$.....
3	\$.....
4	\$.....
5	\$.....
6	\$.....
7	\$.....
8	\$.....
9	\$.....
10	\$.....
11	\$.....
12	\$.....
13	\$.....
14	\$.....
15	\$.....
16	\$.....
17	\$.....
18	\$.....
19	\$.....
20	\$.....
21	\$.....
22	\$.....
23	\$.....
24	\$.....
25	\$.....

I HEREBY AGREE THAT THE ABOVE-LISTED PAINTINGS ARE TURNED OVER TO THE CITRUS WATERCOLOR CLUB FOR THE PURPOSE OF THIS ART SHOW AND THAT I TAKE FULL RESPONSIBILITY FOR THEIR SAFETY. I ALSO UNDERSTAND THAT 20% OF THE SALES PRICE OF ANY PAINTINGS SOLD AT THE SHOW WILL GO TO THE VOLUNTEER ORGANIZATION, AS A DONATION, FOR THE UPKEEP AND RESTORATION OF THIS PARK.

SIGNED.....DATE.....Page# ____ of ____