



Oceanside Days of Art
2017 Artist Application Form
Saturday, April 22nd & Sunday, April 23rd
10:00 am – 5:00 pm

Artist: _____ Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-Mail Address: _____ Website: _____

Media Type (Please describe with as much detail as possible):

Booth Fee: 10' x 10' = \$135.00 Received by February 28, 2017 _____

10' x 20' = \$220.00

10' x 10' = \$155.00 Received after February 28, 2017 _____

10' x 20' = \$260.00

TOTAL ENCLOSED: _____

MAKE CHECKS PAYABLE TO:
OCEANSIDE CULTURAL ARTS FOUNDATION
P.O. BOX 3054
OCEANSIDE, CA 92051
(760) 433-3632 WWW.OCAF.INFO
ODA@OCAF.INFO

PLEASE MAKE SURE TO ENCLOSE THE FOLLOWING:

- 1) Three 4"x 6" color photos representative of the art work to be shown. Label each with name, and phone number.
- 2) Photo of booth display, required. Your application will not be processed without a booth display picture.
- 3) Self-addressed stamped envelope if you want your pictures returned. Acceptance letters will be sent via email after March 28th
- 4) Check for booth fee payment.
- 5) Signed and completed two-page artist application form.

- I agree to display only the type of items described
 I understand that I must exhibit both Saturday and Sunday
 I have exhibited at Days of Art in the past (acceptance not guaranteed)

Application Deadline – March 23, 2017
Notification of Applicant – March 28, 2017

I certify that all the art to be exhibited at Oceanside Days of Art is my own original work. I understand that all the decisions made by the Oceanside Days of Art Committee regarding the jury process are final. I understand neither the City of Oceanside, the Oceanside Cultural Arts Foundation nor the Oceanside Days of Art Committee or their designated agents will be responsible for any loss, theft, or damage to persons or property at this event. I hereby waive and release any and all claim or rights to claims for damages on my behalf against the City of Oceanside, the Oceanside Cultural Arts Foundation, the Oceanside Days of Art Committee or their designated representatives. I certify that I have read and agree with the above statements and agree to abide by all aforementioned artist rules and guidelines.

NAME: (Please print) _____

SIGNATURE: _____

DATE: _____

AMOUNT OF CHECK: _____ CHECK NUMBER: _____