Artwork Submission Form
SOS First Look 2024

Drop off dates: Sunday, March 24, 4-6 pm
Wednesday, March 27, 5:30-8 pm
Monday, April 1, 5:30-8 pm

Name ____________________________________________

Please print your legal name; your public / artist name may be entered below

Phone __________________________ Email __________________________

ARTWORK DISPLAY LABEL INFORMATION

Public / Artist Name (if different) ____________________________________________

Please use the same public name you used when registering for SOS so it’s consistent with the event map and website profile

Title __________________________________________

Medium __________________________________________

Price or NFS (Not for Sale) __________________________________________

LEGALITIES

The staff and volunteers involved with the Somerville Museum and Somerville Open Studios (SOS) will do their best to maintain the safety of all artwork. However, I understand that all sorts of unpleasant things can happen, such as floods, theft, and fire, and I agree not to hold the Somerville Museum, SOS, The City of Somerville, or any of the organizations, agents, or subsidiaries responsible if something horrible should happen to my artwork. I understand that if the artwork remains unclaimed by artists after the show closing and pick up dates (dates and times TBD), neither SOS nor the Somerville Museum will have any obligation with respect to return of the artwork to the artist.

________________________________________________  Date __________________________

Signature of artist or representative

TO BE COMPLETED AT TIME OF PICKUP

This is for when the show is taken down; please do not fill in yet!

Name of person picking up artwork (please print) __________________________

Phone or email (if not the artist) __________________________

Signature of person picking up artwork __________________________

Date & Time __________________________

COMPLETE AND ATTACH SECURELY TO BACK OF ARTWORK

(contact info is for any those interested in purchasing)

Artist’s Public Name __________________________________________

Contact Email / Phone __________________________________________

Title __________________________________________

Medium __________________________________________  Price / FFS __________________________________________