



KS 17

The Artists Summer exhibition 2017
20th. May – 6th. August

Registration Form

Name _____ Sex _____
 Adress _____ Year of Birth _____
 Postal _____ Telf. nr. _____
 E-mail _____ Journal nr. _____

If you forward works using more j.nr. state the rest of the j.nr. here: _____

This Registration form can be used for 5 works within following categories: Graphic, Akvarel, Drawing Painting Sculpture Arts and Ceafths Photo and Video Mixed Media
VIDEO - max. 5 minute running time.

No.	TITEL	TECHNQUE	Size in cm.	Price	CENSUR		
1							
2							
3							
4							
5							

For Graphic and Photo please state under the title how many of the works are for sale..

State here if the works will be collected or has to be returned:

_____ I collect the works , be aware of date and time limit
 _____ Please return the works in the same way as they were forwarded

Any comments: _____

Would you have an interest to participate in the Artist Talk? _____

The artist accepts the general conditions as prescribed in KS17. If Possible KS contacts the artist personally on the mail address and through the News Letter from Janus House.

_____ date _____
 _____ Signature

Receipt if collecting the works

No. _____ collected date _____ No. _____ collected date _____

To be filled in by KS			
Forsendelsesmåde	Emballage	Øvrige bemærkninger	Modt./udpakk. af