

Chester County Art Association

Members Exhibition Contract: October 2024

100 N Bradford Ave.
West Chester, PA 19382
610-696-5600



(PLEASE PRINT): Artist Name _____

Members Show Dates: October 10, 2024 – October 30, 2024

Intake Dates: October 3, 2024 from **11:00am-7:00pm**

Remove work: October 31, 2024 **11:00am-7:00pm**

Reception Date October 10, 2024 5:00pm-7:00pm

REQUIREMENTS a current member of CCAA

- Works must not be any larger than 36"x36", **this includes the framing**. No more than 2 pieces.
- All artwork must have been created in the last 3 years and not previously shown at CCAA unless staff or Exhibition Coordinator approves exception.
- Positioning of your artwork within the gallery is at the discretion of staff and the Exhibition Coordinator
- Understanding that classes/workshops and events are occasionally held in the galleries
- All artwork must be framed, wired, and ready to hang (no saw tooth hangers). 3-D work should be safe and stable. CCAA reserves the right to determine what is exhibition ready.
- All artwork must be labeled with a CCAA exhibition label and the inventory sheet on this contract must be filled out.
- All artwork must remain for the duration of the show, unless otherwise noted by staff or Exhibition Coordinator.
- All artwork must be picked up on the agreed upon date at the end of the show unless otherwise arranged prior to pick up date. **If you are unable to pick up your work, please advise us that you will be sending someone.**
- **Artwork NOT picked up within 14 days of date to remove work becomes property of CCAA.**
- An opening reception will be hosted by CCAA. Light refreshments will be served.

SALES & LIABILITY

- Artwork is insured by CCAA while it is on the property (not in transport).
- All artwork must have a price or be marked NFS.
- CCAA will retain a commission of 40% on all sales.
- CCAA assumes no responsibility for damage of artwork unrelated to our own handling.

**ENTRY FEE PAYABLE TO CCAA AT TIME OF DROP OFF:
\$20 FOR FIRST WORK; \$5 FOR SECOND WORK**

By signing, said artist agrees to adhere to all provisions stated in this contract.

ARTIST SIGNATURE _____ DATE _____

PHONE: _____

EMAIL: _____

Contact: Laurie Moran; LMoran@chestercountyarts.org

Inventory List:

Title:

Medium:

Price:

Title:

Medium:

Price: