Community Gallery — Proposal

Group: ________________________________
School, Youth, Community, or Artists’ organization

Contact Name: ________________________________

Email: ________________________________ Phone: ________________________________

Preferred time period for display: ________________________________
☐ Check box to be added to our waitlist
(You will be notified if a group cancels, which could allow for an earlier installation date)

Describe your proposed exhibition
Exhibition theme or title:

Exhibition Description:

If this exhibition grew out of a program assignment or prompt, please include it here:

Media included in the show:

How many pieces (approximately)? ________________________________

Installation needs (pedestals, bonnets, etc.):

Are you interested in hosting a reception at the museum? __________

As the representative for the exhibiting artists, I have read the Guidelines for exhibiting in the Community Gallery, understand and agree to the conditions, and will see that the Guidelines are followed by the other participants.

Organization Contact ________________________________ Date ________________________________

Please attach a short paragraph describing your organization and its mission and send your completed form to Laura Howick, FAM Director of Education, at lhowick@fitchburgartmuseum.org.