

# Community Gallery

## Proposal Form



Group: \_\_\_\_\_

Non-Profit/Non-Commercial School, Youth, Community, or Artists' organization

Organization website, if applicable: \_\_\_\_\_

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)

**Please answer the following questions to the best of your ability. This information can be updated closer to the date of exhibition.**

Exhibition theme or title:

Exhibition Description:

If this exhibition grew out of a program assignment or prompt, please describe 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.

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Organization Contact Signature

Date

**Please attach a short paragraph describing your organization and its mission** and send your completed form to Susan Diachisin, Director of Education, at [sdiachisin@fitchburgartmuseum.org](mailto:sdiachisin@fitchburgartmuseum.org).