

3. Proposal Form

Please send your completed form to education@fitchburgartmuseum.org or deliver to 185 Elm Street, Fitchburg.

Group: _____

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

Organization website, if applicable: _____

Contact Name: _____

Email: _____ Phone: _____

Preferred time period for display (please select):

Jan	Feb	Mar	Apr	May	Sep	Oct	Nov	Dec
-----	-----	-----	-----	-----	-----	-----	-----	-----

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.

Organization Description and Mission:

Exhibition theme or title:

Exhibition Description: (If your proposal is accepted, this description will be used for marketing purposes.) Please include 1-2 photos of individual works of art, and list the the artist's name, date, and media.

What type of works of art will be in the show (Ex. paintings, photographs, sculpture, etc.):

How many works of art (approximately)

2D or 3D art? _____

3D art maximum size/dimensions (if including 3D art): _____

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

Receptions occur during Museum open hours. A date and time must be confirmed with FAM staff. FAM provides one 6-foot rectangular table for 2 hours.

As the representative for the exhibiting artists, I have read Document **1: Guidelines** for exhibiting in the FAM Community Gallery, understand and agree to the conditions, and will see that the Guidelines are followed by the other participants.

Organization Contact Signature

Date