

OPEN WALL 2024 ARTIST REGISTRATION FORM

FULL NAME (PLEASE PRINT) STREET ADDRESS CITY STATE ZIP CODE EMAIL PHONE NUMBER **ART SALE AGREEMENT:** Please check one \Box 50/50 - I'm not a BMoCA member • (50% to artist and 50% to BMoCA*) □ 60/40 – I'm a BMoCA member • (60% to artist and 40% to BMoCA*) □ 0/100 - I want to donate 100% • (0% to artist and 100% to BMoCA*) ARTWORK DETAILS: Please fill out for each work submitted to sell TITLE YEAR MEDIUM PRICE (MINIMUM \$20) \$_____ TITLE_____YEAR____MEDIUM_____ PRICE (MINIMUM \$20) \$ TITLE _____YEAR_____MEDIUM______ PRICE (MINIMUM \$20) \$_____ TITLE_____YEAR____MEDIUM_____ PRICE (MINIMUM \$20) \$_____ TITLE YEAR MEDIUM PRICE (MINIMUM \$20) \$

*BMoCA proceeds will benefit the museum's education and exhibition programming.

TERMS AND CONDITIONS / LIABILITY WAIVER

- I do not hold liable the Boulder Museum of Contemporary Art for any damage or theft of my art during the Open Wall event April 5-7, 2024. If I break an item on exhibit at Open Wall, I am responsible for paying 50% of the stated price, up to \$500. If my artwork is broken at Open Wall, I understand that I will only receive 50% of the stated price, up to \$500. By signing this document I acknowledge that I have personal insurance coverage for my artwork/s to be exhibited at the Open Wall event April 5-7, 2024 and/or I am exhibiting my artwork/s at my own risk.
- 2. I understand that if my artwork is not purchased, I am responsible for removing it from the Boulder Museum of Contemporary Art on Sunday, April 7 from 5-8pm. Any artwork unclaimed by the end of day will be donated to the charity of BMoCA's choice.
- 3. I understand a percentage of the selling price of my artwork will benefit BMoCA. This percentage is determined by my membership status at BMoCA as described in the Art Sale Agreement choice selected above. The proceeds selection is indicated above.
- 4. I understand that by bringing my artwork to Open Wall (April 5-7, 2024) I am consenting to sell my artwork in an art sale.
- 5. I understand the price is the amount I will sell my artwork for. I understand that I will receive a percentage of the art sales as indicated in my selection above.

PHOTOGRAPHY CONSENT

I hereby grant the Boulder Museum of Contemporary Art the right to use my image for educational program or public relations purposes only.

By signing, I accept these terms and conditions and give photography consent.

SIGN: _____

DATE: ______