

Entry # \_\_\_\_\_ (for office use only)

# 2010 Opening Minds ART SHOW ENTRY FORM

Supplying this information will not forfeit your confidentiality;  
it will not be included with your art.

Artist Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Are you interested in selling your art entry if someone wants to buy it? (Circle one)  
YES or NO

**The information below will be displayed next to your art entry.**

**Name** (feel free to use initials, first name only, anonymous, or whatever you feel most comfortable posted next to your art piece) \_\_\_\_\_

**Title of Entry:** \_\_\_\_\_

**Description of Entry** (poem, watercolor, sculpture...): \_\_\_\_\_

The entry may be displayed at the Opening Minds Art Show in May 2010. Artists are encouraged to carry their own insurance for their entries if they feel necessary. The artist agrees that Transitions-Mental Health Association and those involved shall be liable for any loss, theft, or damage on any artwork that may occur during transport, storage, or showing of this art. The artist agrees that Transitions-Mental Health Association has the authority to exhibit this entry for the May 2010 showing. Featured piece entry due 3-23-10. All other entries due by 4-19-10, at Transitions-Mental Health Association, 277 South St., Suite Y, San Luis Obispo. Following the show, your piece will be available for pick up at the same location.

**I UNDERSTAND THAT I AM SUBMITTING MY ART TO A SHOW SPECIFICALLY FOR ARTISTS WHO HAVE A MENTAL ILLNESS AND THAT PICTURES OF MY ART MAY BE USED IN EDUCATIONAL OR PROMOTIONAL MATERIALS.**

Artist Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For more information, contact Meghan Walters**

**(805) 503-0350**

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