

Frank Bette

CENTER FOR THE ARTS

Signature Gallery Artist Agreement

Name: _____

Address: _____

City: _____ Zip: _____

E-mail: _____ phone: _____

Please list your online presence information ie. web site, etsy, ebay etc:

Title of Exhibit _____

Exhibit dates: _____

Install date: _____

Take down date: _____

I affirm that I have read the Prospectus and Artist Agreement and understand, and agree to follow the rules as outlined in the prospectus. FBCA has my permission to photograph and otherwise reproduce submitted or completed images with appropriate attribution for promotional purposes.

I acknowledge that: (1) all reasonable care will be taken with the artwork (2) FBCA, its officers, employees, volunteers, and representatives are not responsible for the loss or damage to exhibitors' art-work, however caused, and whether in transit or on display and (3) FBCA does not carry loss insurance and strongly recommends participants carry their own loss insurance.

I agree:

- To forever release the Frank Bette Center for the Arts, its directors, officers, agents and volunteers, from any and all liability to me, my representatives, assigns, heirs, executors and/or next of kin on account of bodily injury, death or property loss or damage arising from my participation in any Frank Bette Center for the Arts activity, whether caused by the negligence of the Center or its agents or otherwise.
- To expressly and voluntarily assume all risk of personal injury, death and property loss or damage arising out of my participation in a Frank Bette Center activity or while on or about the premises of the Center.
- To indemnify and hold harmless the Frank Bette Center, its directors, officers, agents and volunteers, from any and all loss, liability, damage or cost that the Center may incur arising out of my participation in any Frank Bette Center activity.
- By signing this agreement form, I understand and agree to be bound by all the terms and conditions outlined in the Signature Gallery Prospectus and application and agreement form.

Artist Signature: _____ Date: _____

FBCA Representative _____ Date: _____