



# PARTICIPANT REGISTRATION 2016

Opening Thursday, November 3 / Ekphrasis-Poetry, Music, Dance, Art, November 5  
Open Studio Weekend, Sat & Sun, November 12 & 13 *produced by Artists in Real Time*

Artist     Artist Group     Venue for Visiting Artists     Other (specify below)  
 Non-Profit Organization     Art-Related Organization

CONTACT OR ARTIST LAST NAME \_\_\_\_\_ CONTACT OR ARTIST FIRST NAME \_\_\_\_\_

COMPANY NAME(if applicable) \_\_\_\_\_ COMPANY PHONE NUMBER \_\_\_\_\_

**FOR PUBLICATION:** ARTIST OR COMPANY NAME AS YOU WISH IT TO APPEAR IN PRINTED MATERIALS

MAILING ADDRESS \_\_\_\_\_ CITY STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BEST PHONE NUMBER \_\_\_\_\_ ALTERNATE PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ WEBSITE \_\_\_\_\_

MEDIUM \_\_\_\_\_

DESCRIBE YOUR WORK (Approximately 50 characters): \_\_\_\_\_

CHECK ONE FORM OF CONTACT INFORMATION FOR PUBLICATION     Email Address     Telephone     Website

**MY PREFERRED LOCATION ON THE OPEN STUDIO TOUR:**

MY STUDIO OR BUSINESS	<input type="checkbox"/>	Address: _____
SPECIFIC GROUP VENUE	<input type="checkbox"/>	Notes: _____
PLEASE ASSIGN A SPOT	<input type="checkbox"/>	Notes: _____

I do NOT need wall space  I use tables, own panels etc \_\_\_\_\_

I WILL SUBMIT A PIECE FOR THE GROUP SHOW RUNNING THE MONTH OF NOVEMBER

\$60 Registration Fee     \$75 Sponsor an Artist in Need     Tax-Deductible Donation of \$ \_\_\_\_\_

OTHER COMMENTS \_\_\_\_\_

**To complete registration – EMAIL FORM TO: [openstudiohartford@gmail.com](mailto:openstudiohartford@gmail.com):**

Artist Statement / Bio for website (One Word doc)     4 images of your work (300 dpi) I authorize use for the website & publicity

**Or mail to: Artists in Real Time, PO Box 1138, Hartford, CT 06143**

**Include check payable to ART or PAY ONLINE at: [www.artistsinrealtime.org](http://www.artistsinrealtime.org)**

**DEADLINES: No listing in brochure after 9/15 / No listing in CTNow after 10/1 (Artist Information Manual available)**

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