

Center:	Date:
Artist Name:	
Phone # :	
Title:	
Contact's Phone #	
Alternate Contact (not a seasonal resident or spouse)	
Please attach this form to the back of your art work and enter the date in the venue where you are exhibiting this work. Keep the form there until the work is removed from the recreation centers.	

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Art Display	
Title	_____
Artist	_____
Phone No.	_____
Medium	_____
Art Group	_____

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