

## **GALLERY APPLICATION FORM**

| Name:   |
|---|
| Contact number:   |
| Home City:  |
| Art Medium:   |
| Have you had an exhibition in our space before? If yes, when? |
| How many pieces do you anticipate having in your exhibit?     |
| Are you a member of   |

## **THANK YOU!**

Please fill this application in and then email a sample of your current work to info@moosejawculture.ca

If you have a website or link to a portfolio, please include that in your correspondence.

Please download, fill out and submit