

10'x10' Booth Application – Due May 3, 2024

APPLICANT NAME:

(Last)	(First)		(Middle Initial)	
ORGANIZATION NAME: (if applicable)			
ADDRESS:				
(Street)	(City)	(State)	(Zip)	
PHONE NUMBER:				
Please provide a cell phone	e number that you can be reached at	during the festival.		
E-MAIL ADDRESS:				
Acceptance and artist information will be communicated only via email. Please include a frequently monitored e-mail address.				
WEBSITE AND/OR FACEBOOK LINK:				
IOWA SALES TAX NUMBER: (if applicable)				
Please note: if you do not have one, you may need to apply. See www.blanden.org for info.				

DESCRIPTION OF WORK TO BE DISPLAYED:

Are you interested in doing a demonstration of your work during the Art Festival at your booth/table?

____ Yes ____ No What demonstration will you be doing:

____ Submitted 5 digital images that best represent your work. Label images with your first and last name and number. Example: James_Smith_01.jpg. Images can be submitted via a CD, saved on USB thumb drive, or emailed to <u>blandenmemorial@gmail.com</u> ____ Submitted Booth Fee: A 10' x 10' booth (you must provide your own) for \$65 each. \$55 for Blanden Art Museum Members and currently enrolled college students with an ID.

I acknowledge and agree that participation in the 2024 Blanden Arts Festival (the "Activity") to be conducted by the Blanden Art Museum and the Blanden Charitable Foundation (BCF), an Iowa non-profit corporation involves the possibility that my property including, without limitation, any art or other items on display (collectively, the "Property"), may be damaged, lost or stolen and I acknowledge I am assuming the risk of loss of the Property by participating in the Activity. For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I agree to release and hold harmless the Blanden Art Museum and BCF, their directors, officers, employees, agents, and affiliates from any and all liability for negligence or any other claim, judgment, loss, liability, cost or expense (including, without limitation, attorneys' fees) arising out of my participation in the Activity including, without limitation, any claims for damaged, lost or stolen Property. I further agree to indemnify and hold harmless the Blanden Art Museum and BCF, their directors, officers, employees, agents and affiliates, from any and all loss, damage, liability, cost or expense that the Blanden Art Museum and BCF may incur or suffer as a result of any claim of any kind whatsoever arising out of my participation in the Activity.

I hereby represent and warrant that I have read this Release and Waiver Form in its entirety and fully understand its contents. I have signed this Release and Waiver Form voluntarily and of my own free will.

Signature:



6'x30" Table Application – Due May 3, 2024

APPLICANT NAME:

(Last)	(F	First)	(Middle Initial)		
ORGANIZATION NAME: (if applicable)					
ADDRESS:					
(Street)	(City)	(State)	(Zip)		
PHONE NUMBER:					
Please provide a cell pho	ne number that you can be reached a	t during the festival.			
E-MAIL ADDRESS:					
Acceptance and artist info	prmation will be communicated only v	a email. Please include a freque	ntly monitored e-mail address.		
WEBSITE AND/OR FACI	EBOOK LINK:				
IOWA SALES TAX NUM	BER: (if applicable)				
Please note: if you do not	have one, you may need to apply. So	ee www.blanden.org for info.			
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Submitted Table Fee: A 6' x 30" table inside the larger tent for \$40 each. \$30 for Blanden Art Museum Members and currently enrolled college students with an ID. Max 2 tables per artist. Indicate in the box number of tables requested.

I acknowledge and agree that participation in the 2024 Blanden Arts Festival (the "Activity") to be conducted by the Blanden Art Museum and the Blanden Charitable Foundation (BCF), an Iowa non-profit corporation involves the possibility that my property including, without limitation, any art or other items on display (collectively, the "Property"), may be damaged, lost or stolen and I acknowledge I am assuming the risk of loss of the Property by participating in the Activity. For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I agree to release and hold harmless the Blanden Art Museum and BCF, their directors, officers, employees, agents, and affiliates from any and all liability for negligence or any other claim, judgment, loss, liability, cost or expense (including, without limitation, attorneys' fees) arising out of my participation in the Activity including, without limitation, any claims for damaged, lost or stolen Property. I further agree to indemnify and hold harmless the Blanden Art Museum and BCF, their directors, officers, employees, agents and affiliates, from any and all loss, damage, liability, cost or expense that the Blanden Art Museum and BCF may incur or suffer as a result of any claim of any kind whatsoever arising out of my participation in the Activity.

I hereby represent and warrant that I have read this Release and Waiver Form in its entirety and fully understand its contents. I have signed this Release and Waiver Form voluntarily and of my own free will.

Signa	ture:
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