Application for Exhibiting Artist Membership

Please Print Clearly and email this Application to
Bill Smith at wfs3@me.com with 7 to 10 photos of your work
Or mail to
Lahaina Arts Society, P.O. Box 11045, Lahaina, HI 96761

NAME:_____ DATE: _____

E-MAIL ADDRESS: _____

MAILING ADDRESS: _____

_____

_____

TELEPHONE: MOBILE: _____ HOME: _____

HOW LONG HAVE YOU RESIDED ON MAUI? _____Years _____Months
(Applicants must demonstrate they have been a resident of Maui County for at least the six months prior to application)

ART MEDIUM: (Artists will only be considered for up to two medium categories per jury session. See website "Membership" section for "LAS Jury Guidelines" for general jury criteria and the list of accepted mediums. Select your medium(s) from that list. Please familiarize yourself with related LAS operational documents. All work presented must have been created within the last two years.

Medium #1_____ Medium #2_____

ARTIST'S STATEMENT ABOUT HIS/HER WORK:

WHY DO YOU WANT TO JOIN LAS?

EDUCATION:

I AM INTERESTED IN: ~~Gallery showing~~ _____ Art Festival participation _____

VOLUNTEER INTERESTS (i.e. teaching, social media, marketing, etc.) _____

LIABILITY RELEASE: LAS is not responsible for loss, theft, or damage of artist's work and LAS does not carry insurance for artist's work. The artist is responsible for transport, display and removal of his/her works at all times, including throughout and after the jury process, and LAS shall have no liability therefore. The artist is responsible for his/her own insurance against loss or damage of artist's work, including during the application and jury process, and LAS is not responsible for damage to artists work during jurying, at art fairs or when stored on LAS premises. By signing below, you acknowledge and agree to this.

Artist Signature_____Date _____