

Galeria de Corrales

Application for Membership

Name _____

Physical Address _____

Mailing Address _____

Home Phone _____ Cell Phone _____

Email Address _____

List art medium you wish to display/sell _____

Price Range _____

List affiliations with galleries, art shows, at organizations, etc. _____

As we are a co-op gallery.
are you willing to work at the gallery an equivalent of up to two (2) full days per month?

Yes No If No, Please explain _____

As we are a co-op gallery.
are you willing to work at the gallery for receptions, curating, rotation of art work and physical maintenance of the gallery?

Yes No If No, Please explain _____

Upon becoming a member of the Galeria de Corrales, I understand the co-operative gallery rules and regulations and I am able and willing to comply with the responsibilities required.

Every effort will be made for safe-keeping of your artwork; however, the Galeria de Corrales is not responsible for loss or damage to art work you leave with us during the jurying period. Your signature below indicates you understand and agree to the above statements.

Signed _____ Date _____

Please submit this application along with your artwork for jurying. We require three to five pieces of each medium you are intending to show at the gallery for the jurying process.

Below is for Galeria de Corrales personnel use only

Date Application received _____ Date of jurying _____

Jury results: Accepted Declined Wait Listed

Applicant notified of results by _____ Date _____