



DISPLAY AND EXHIBIT APPLICATION INFORMATION

Any material submitted for consideration must be retrieved in person. The Library will not return submittals by mail.

Those interested in exhibiting should submit the following via U.S. mail or e-mail to:

Mrs. Sarah Potwin
Library Director
LaGrange Association Library
488 Freedom Plains Rd., Suite #109
Poughkeepsie, NY 12603
spotwin@laglib.org

1. A maximum of ten digital images of recent creative work on CD or as an email attachment that represents a consistent body of the artist's work. Each digital image must be: saved at 300 DPI resolution, jpg format, clearly numbered.
2. A narrative consisting of a numbered list noting the medium, size (indicate inches or feet) and year each piece was produced. Give titles where possible.
3. A one page biography and artist's statement with artist's name and contact information including an e-mail address and telephone number. Library notification will be sent by email.



DISPLAY AND EXHIBIT APPLICATION

Exhibitor(s) _____

Address _____

Telephone _____

Dates of exhibit _____

Specific times requested for:

Set Up: _____

Opening: _____

Removal: _____

Description of exhibit:

Please attach list of items to be displayed as described on the LaGrange Association Library form headed:
Display and Exhibit Policy.

I (WE) HAVE READ the policy information and accept responsibility for compliance with the procedures and rules governing the use of the exhibit space at LaGrange Association Library.

Signature

Date

Signature

Date

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For library use:

Date _____ Approved and confirmed with applicant(s) _____



INSURANCE WAIVER AND RELEASE

I, the undersigned, hereby lend the following works of art or other material to the Library for exhibit purposes only. I (WE) HAVE READ the policy information and understand that insurance for exhibited works is recommended and that in the event of loss or damage the artist/owner/signatory is solely responsible. In consideration of the privilege of exhibiting them in the Library, I hereby hold harmless and release LaGrange Association Library from responsibility for loss, damage or destruction while on Library property.

Exhibition to be held in the _____ from (dates) _____

Description of materials loaned:

Signature _____

Date _____

Address _____

Telephone _____

Email _____

Please mail completed forms to:

Mrs. Sarah Potwin, Library Director
LaGrange Association Library
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Poughkeepsie, NY 12603