

**** ATTACH A LABEL TO THE BACK SIDE OF YOUR ARTWORK ****

Name	
Home Phone	Cell Phone
<input type="checkbox"/> Adult Artist	<input type="checkbox"/> Student Artist Grade (K-12)_____
Title	<input type="checkbox"/> Night <input type="checkbox"/> St. Francis
_____ <input type="checkbox"/> For Sale/ Sale \$ _____	Insurance Value _____
<input type="checkbox"/> PHOTOGRAPH	<input type="checkbox"/> ART <input type="checkbox"/> POETRY <input type="checkbox"/> SILENT AUCTION
Category:	

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