



## GALLERY SHOP CONSIGNER APPLICATION

Artists are invited to submit an application to sell their artwork in the Gallery Shop on **Consignment**.

**Artists are required to provide a selection of images of their work (3-6 images) and a short CV/Resume (1 page).** Images may be provided as printed photographs or jpeg files.

Digital images are to be emailed to [tweedart@tweed.nsw.gov.au](mailto:tweedart@tweed.nsw.gov.au)

Attn: Gallery Shop. Please name your digital files SURNAME\_Firstname\_Title\_Medium\_Year

Applications are assessed on a monthly basis by a panel. Successful artists will notified in writing and admitted to the shop on a consignment basis. **Please note:** Walk in appointments are **not** accepted.

### 1. Artist Details

Please advise changes to your contact details to ensure you continue to receive our information and updates

Title	<input type="text"/>	First Name	<input type="text"/>	Surname	<input type="text"/>
Address	<input type="text"/>				
Suburb	<input type="text"/>	Postcode	<input type="text"/>		
Home	<input type="text"/>	Mobile	<input type="text"/>	Work phone	<input type="text"/>
Email	<input type="text"/>		Webpage	<input type="text"/>	
Instagram	@ <input type="text"/>	<input type="checkbox"/> Please tick if you identify as an Aboriginal or Torres Strait Islander artist			
ABN	<input type="text"/>	GST Registered	<input type="checkbox"/> Yes <input type="checkbox"/> No	OR	<input type="checkbox"/> "Hobbyist"

**I have supplied** please name digital files SURNAME\_Firstname\_Title\_Medium\_Year

one page resume/CV or artists statement  photographs  jpegs on disc  jpegs by email

### 2. Medium

Ceramics  Glass  Jewellery  Cards  Wood  Sculpture  Textiles

Other (please specify)

**Please provide a brief outline of your arts/craft practice and personal details, such as where you studied, if you are self-taught, where your studio is located and what inspires you.**

### 4. I certify that the information I have provided is true and correct.

**Privacy disclaimer:** Council will not disclose your personal information beyond the relevant officers of Council unless required by law or you have given your consent. However, in order to perform the above functions, we may need to disclose some personal information to relevant Council committees. By completing and signing this registration form you are giving consent to Council to manage your personal information in the manner described.

Signature	<input type="text"/>	Date	<input type="text"/>
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