

Exhibitor Release

The Lewisburg Arts Council and The Public Library for Union County assume no liability, stated or implied. Exhibitor understands that all entries to the exhibit must remain in the exhibit for its entire duration. I agree to these conditions.

 Exhibitor's Name (please print) Exhibitor's Signature Date

Artist Receipt or Claim Check

Name _____
 Title 1 _____
 Title 2 _____
 Title 3 _____
 Received _____
 Cash _____ Check # _____
 Received by _____

Artist's Name _____

Address _____

Phone _____ **Email** _____

Entry # 1 Title _____

Medium _____

LAC Assigned Number	
---------------------------	--

Not For Sale For Sale \$ _____

Entry # 2 Title _____

Medium _____

LAC Assigned Number	
---------------------------	--

Not For Sale For Sale \$ _____

Entry # 3 Title _____

Medium _____

LAC Assigned Number	
---------------------------	--

Not For Sale For Sale \$ _____

For LAC Receiver Cash: _____ Check # _____ Received by: _____

Entry #1

	LAC Assigned Number
--	---------------------------

Name _____

Title _____

Medium _____

Not For Sale
 For Sale \$ _____

Entry #2

	LAC Assigned Number
--	---------------------------

Name _____

Title _____

Medium _____

Not For Sale
 For Sale \$ _____

Entry #3

	LAC Assigned Number
--	---------------------------

Name _____

Title _____

Medium _____

Not For Sale
 For Sale \$ _____