



**G A B R I O L A**  
**A R T S C O U N C I L**  
 ALL ARTISTS, ALL ARTS

[www.gabriolaartscouncil.org](http://www.gabriolaartscouncil.org) ♦ [info@gabriolaartscouncil.org](mailto:info@gabriolaartscouncil.org)  
 #9 – 575 North Road, P.O. Box 387, Gabriola Island, BC V0R 1X0  
 Phone: 250-247-7409 Fax Service: 250-247-8313

**Final Deadline:**  
**Dec. 19, 2007**

**Guest Artist Application for**  
**Studio Tour 2008** Oct. 11–13, 2008

Artist: \_\_\_\_\_ Phone: 247- \_\_\_\_\_  
 Website: www. \_\_\_\_\_ Email: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Postal Code V0R 1X \_\_\_\_\_  
 Principal Studio Artist Name: \_\_\_\_\_  
 Type of Art: Choose your 1<sup>st</sup> and 2<sup>nd</sup> descriptions below. Sorry, we can't guarantee 2<sup>nd</sup> choices will be listed.  
**Text Description for Brochure** (2 lines, ~9 pt Arial and 2.25" wide. We reserve the right to edit text to fit.)  
 Yes  No Same as last year? If not, please print your description (use reverse)  
 \_\_\_\_\_  
**Photo\* for Brochure** At least 300 dpi; clean, clutter-free image, 1.25" wide by 0.875" high.  
 Yes  No Same as last year? If not, please email a photo to [info@gabriolaartscouncil.org](mailto:info@gabriolaartscouncil.org)

<b>Application Fee:</b> Guest Artist, \$85	\$ 85.00
<b>2008-09 Arts Council Membership:</b>	\$ 10.00
<b>Total Enclosed:</b> Entries only accepted with full payment (cheque or cash). <i>Payment is non-refundable.</i>	\$ <u>95.00</u>

*Please make cheques payable to the Gabriola Arts Council. The Gabriola Arts Council is not responsible for cash left unattended.*

Yes  No I would like to sell ArtBucks raffle tickets.  
 Yes  No I would like to deliver brochures to \_\_Victoria, \_\_Vancouver, \_\_Lower Mainland, \_\_Nanaimo, \_\_Parksville-Qualicum, \_\_Courtenay + North, \_\_Ladysmith—Duncan, or \_\_Other town or city:  
 Volunteer for the Arts Council?  Studio Tour  Other  Not at present

Type of Art	1 <sup>st</sup>	2 <sup>nd</sup>
Basketry	<input type="checkbox"/> 1	<input type="checkbox"/>
Fibre	<input type="checkbox"/> 2	<input type="checkbox"/>
Furniture	<input type="checkbox"/> 3	<input type="checkbox"/>
Gallery/Gifts	<input type="checkbox"/> 4	<input type="checkbox"/>
Garden	<input type="checkbox"/> 5	<input type="checkbox"/>
Glasswork	<input type="checkbox"/> 6	<input type="checkbox"/>
Jewellery	<input type="checkbox"/> 7	<input type="checkbox"/>
Leatherwork	<input type="checkbox"/> 8	<input type="checkbox"/>
Metalwork	<input type="checkbox"/> 9	<input type="checkbox"/>
Mixed Media	<input type="checkbox"/> 10	<input type="checkbox"/>
Painting	<input type="checkbox"/> 11	<input type="checkbox"/>
Photography	<input type="checkbox"/> 12	<input type="checkbox"/>
Pottery	<input type="checkbox"/> 13	<input type="checkbox"/>
Sculpture	<input type="checkbox"/> 14	<input type="checkbox"/>
Stonework	<input type="checkbox"/> 15	<input type="checkbox"/>
Woodwork	<input type="checkbox"/> 16	<input type="checkbox"/>
Other		

**Initial** beside "yes" to complete your Participation Agreement:

- I am a member in good standing of the Gabriola Arts Council. Yes \_\_\_\_\_
- My residence or studio is on Gabriola, Mudge, Link, Decourcey or Valdes Island. Yes \_\_\_\_\_
- All work will be created by me. Yes \_\_\_\_\_
- My work is original and/or limited edition, not manufactured or kit-assembled. Yes \_\_\_\_\_
- My work is of professional quality. Yes \_\_\_\_\_
- I will not sell food items or agricultural products. Yes \_\_\_\_\_
- My studio/gallery will be open for the three full days from 10:00 a.m. to 4:00 p.m. and staffed by me. Yes \_\_\_\_\_
- My studio will be presentable and ready to welcome visitors. Yes \_\_\_\_\_

My signature below indicates that I have read and understand the terms and conditions listed above, and that I understand that failure to comply with the terms and conditions may result in my being banned from participating in future studio and gallery tours.

This Participation Agreement is between the Gabriola Arts Council and the applicant(s).

Signed \_\_\_\_\_ Signed \_\_\_\_\_  
 Artist for Gabriola Arts Council  
 Date \_\_\_\_\_ Date \_\_\_\_\_  
 Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

\*Please consider providing 1 or 2 additional photos and a paragraph of text about yourself for promotion.