

HATS Off To The Arts

PARTICIPATION FORM

By my signature, I hereby waive any claim against HATS Off To The Arts, HATS, Central Michigan University, or their agents and volunteers for any loss arising out of the Event. I have read the above statement carefully and agree to all terms and conditions of this participation form.

Signature _____ *Date* _____

PLEASE RETURN THIS FORM TO:

Cathy Tillotson
411 Kane
Mt. Pleasant, MI 48858

INCLUDE A SELF ADDRESSED STAMPED ENVELOPE FOR RETURN OF SLIDES
AND PHOTOS IF YOU WISH TO HAVE THEM BACK!

HATS Off To The Arts
PARTICIPATION FORM • DEADLINE: APRIL 1, 2010
www.hatsofftothearts.com

Name: _____ Business Name: _____

Address: _____ City _____ State _____ Zip _____

Phone: _____ Email _____

Do you have special display requirements? If so, please describe:

PLEASE NOTE: A slide, photograph, or emailed image is required for each item being submitted.

Email to: debgascho@gmail.com

	Title of Artwork	Medium	Size	Price to the Public* <small>(50% to you and 50% to HATS = price to the public)</small>
1)	_____			
2)	_____			
3)	_____			
4)	_____			
5)	_____			
6)	_____			

***INSURANCE VALUE IS 50% OF PUBLIC PRICE**

*If you have questions regarding your submission(s) or this form,
please contact Cathy Tillotson at 989-330-3249 or 989-773-3692*