

LUNACON 2016 ART SHOW RESERVATION FORM

I understand that my submission of this signed and dated LUNACON 2016 Art Show Reservation Form signifies that I have read and accepted the Art Show Rules provided with this form.

Artist's Signature (Required) _____ Date _____

Artist Name _____ Agent Name _____

Address _____ Address _____

_____ (if different) _____

Phone _____ Phone _____

E-mail address _____ E-mail address _____

My art will arrive with: ___ ME ___ MY AGENT ___ MAIL-IN ___ OTHER

Make checks payable to (if different from Artist Name) _____

Credited Press Photography allowed? ___ YES ___ NO Send bid & control sheets in mail? ___ YES ___ NO

Put on Wait List if no space/not all space requested available? ___ YES ___ NO

PANEL SPACE

TABLE SPACE

PRINT SHOP

_____ 3 Panels \$126.00

_____ Full \$42.00

_____ 1 Panel \$42.00

_____ 2 Panels \$84.00

_____ Half \$21.00

_____ 1/2 Panel \$21.00

_____ 1 Panel \$42.00

_____ Quarter \$11.00

_____ 1/3 Panel \$14.00

_____ 1/2 Panel \$21.00

Electricity Needed? _____

Total # of prints _____

Any special requests? _____

\$ _____ Art Show Fee (total panels and tables)

\$ _____ Print Shop Fee (total panel space)

\$ _____ Mail-In Fee (only if mailing in art)

\$ _____ Return Postage (Mail-In ONLY)

\$ _____ Membership(s) _____ Adult @ \$55; _____ Child (age 6 to 12) @ \$30 until 2/29/16

(Include names & addresses for additional members on separate sheet)

\$ _____ Total amount enclosed

_____ Check/Money Order payable to "Lunacon 2016" MAIL TO: LUNACON 2016 ART SHOW

P.O. BOX 3137

NEW YORK, NY 10163-3137