# Six-Word Memoirs







## ENTRY CHECK-LIST

- Completed Entry Form
- Artist Statement (Optional Please attach to entry form.)
- High-Quality Images (Optional Please email digital images of work to katiep@huinoeau.com)

	Please PRINT t	he entire form clearly & legibly! Thank yo	ou!
<u>ARTIST:</u>			
Name:			
Address:			
City, State, ZII	·		
Email:			
ARTWOF	K: * Please list ALL INFO	DRMATION as you wish it to appear on th	e GALLERY LABEL.
Title 1:		Medium:	Price:
Title 2:		Medium:	Price:
Title 3:		Medium:	Price:
YES – <mark>I have rea</mark> for any loss or c narmless Hui No	amage to the work(s) here	understand and agree that Hui No'eau will eby submitted for consideration. I will inden age to my entry(s) or frame(s).	
	STAFF USE ONLY!  1. Membership: □ Choose level: □\$4  2. Current W-9 For	renewal	ther

STAFF USE UNLY!					
<ol> <li>Membership: □renewal</li> </ol>	□current	□new			
Choose level: □\$45 indiv.	□\$75 family	□\$	other		
2. Current W-9 Form? □Yes	□No				
3. Members: # of entries:	x price (\$ <sup>-</sup>	10) = \$			
Non-Members: # of entries: x price (\$25) = \$					
Total: \$					
Paid by: □Check #	_ □Cash □Vi	sa □MC □	Disc		

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#### **LABELS**

Attach one copy to the upper RH corner of the back (2-d) or bottom (3-d) of each piece. Save the other copy as a receipt for artwork pickup.

Label 1 – ATTACH TO PIECE: ADULT	Receipt 1 – SAVE FOR PICKUP: ADULT
Name: Title:	Name: Title:
Medium:	Medium:
Label 2 – ATTACH TO PIECE: ADULT  Name: Title: Medium:	Receipt 2 – SAVE FOR PICKUP: ADULT Name: Title: Medium:
Label 3 – ATTACH TO PIECE: ADULT  Name: Title: Medium:	Receipt 3 – SAVE FOR PICKUP: ADULT  Name: Title: Medium:

## **IMPORTANT DATES:**

Receiving Day: Tuesday, May 28 / 9am - 4pm

Notification: Wednesday, May 29 by 6pm via huinoeau.com Pick up of non-selected work: Thursday, May 30 / 9am – 4pm

Opening Reception: Friday, June 7 / 5 – 7pm

Pick up of non-sold, selected work: Saturday, July 27 / 9am – 4pm