CALAVERAS COUNTY ARTS COUNCIL

P.O. Box 250
22 Main Street
San Andreas, CA 95249

goldrusharts18@gmail.com
209/754-1774 office

Gallery Consignment Agreement

Show _____

_____

Please print clearly

Artist Name _____ Artist # _____

Mailing address _____ Phone _____

City, State, Zip _____

Email _____

Website _____

Inventory received

date	qty.	medium	Item Description/Title	price/ea	date sold	date p/u

Agreement: I agree to show and sell my works through The Calaveras County Arts Council. The above works of art are consigned to the Calaveras County Arts Council; 80% of the retail price goes to the artist, and 20% of the retail price goes to the Gallery. All reasonable care of art work will be taken. However, the Calaveras County Arts Council will not asusme responsibility for lost of damaged work.

I agree to pick up my artwork within 30 days of close of show. If I don't pick up the artwork or contact the gallery to arrange a later pickup, I understand that I may forfeit my artwork and it will become the property of the Gallery.

I certify that all work is original and created by myself, the submitting artist. I certify that the artworks listed here are not copies of the work of any other artist, living or dead, or any published or copyrighted work.

By my signature here, I give the Calaveras Arts Council permission to use photos of my artwork for publicity purposes including, but not limited to, newspapers, brochures, social media (such as Facebook and Instagram).

_____

Artist signature Date

_____

Gallery Representative Date