Newark Arts Alliance Inventory Sheet

		Name:	**Address:**	**Membership Expiration date:**
		Phone:	**Email:**	
Website:			**Facebook:**	**Instagram:**

	Quantity	Title, description, size	Medium	Price	Date Submitted	Date Juried	Date Removed & Artist Initials
				$			
				$			
				$			
				$			
				$			
				$			
				$			
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				$			
				$			
				$			
				$			
				$			
				$			

Agreement

I understand that works will be juried by the Gallery Shop Committee and that, if accepted, the item(s) will be displayed as outlined in the Gallery Shop Guidelines. I agree to abide by the Gallery Shop Guidelines and to hold the NAA harmless for any loss, harm or damage resulting from the entry and display of my work.

Artist Signature	**Date**	
I agree to pick up my work promptly when notified to do so and understand that **any items not collected within 30 days of notification will be considered the property of the Newark Arts Alliance**.	**Artist Initials**	