



MONTHLY SHOW TAKE-IN SHEET

DATE: _____ CHECK # _____ \$ _____

NAME: _____

PHONE: _____

EMAIL: _____

- ADDRESS: _____
- (IF NEW MEMBER THIS MONTH)

TITLE OF WORK	ORIGINAL/ GICLEE'/PRINT	MEDIUM	DIAGONAL MEASUREMENT	PRICE
1.				
2.				
3.				

MEDIA: Oil/Acrylic, Watercolor, Mixed Media, Photography, Digital Art, Jewelry, Glass, Textile, Other,

NOTE: Giclee's and prints of paintings are not eligible for ribbons or cash awards

JOBS _____



I UNDERSTAND THAT THE SAN DIEGUITO ART GUILD/OFFTRACK GALLERY, (SDAG/OTG) AND/OR THE LANDLORD ARE NOT INSURED FOR COVERAGE OF ARTWORK AT THE GALLERY AND/OR IN UNSECURED AREAS. SDAG/OTG AND/OR LANDLORD CAN NOT BE LIABLE FOR LOSS OR DAMAGE TO ANY ARTWORK AT ANY TIME. I WILL PROVIDE MY OWN INSURANCE IF I DEEM IT NECESSARY.

I ALSO AGREE TO PERMIT MY ART TO BE PHOTOGRAPHED AND USED FOR SDAG/OTG ADVERTIZING/P.R. PURPOSES.

IF FOR ANY REASON MY ART IS LEFT AT THE SDAG/OTG GALLERY AFTER A SHOW, A RENTAL PERIOD OR NON-RENEWAL OF MY SDAG MEMBERSHIP FOR A TIME PERIOD PAST (30) DAYS, ART WILL BE CONSIDERED ABANDONED AND BECOME THE PROPERTY OF THE SDAG/OTG AND GIVE PERMISSION TO THE SDAG/OTG TO USE/DISPOSE OF IN ANY MANNER CHOSEN.

I UNDERSTAND AND HAVE READ THE ABOVE (3) STATEMENTS. _____ INTITAL HERE

SIGNATURE: _____

DATE: _____