



Tuggerah Lakes Art Society INC

tlas.org.au

ABN81 282 337 158

Mingara Orchid Fair & Art Exhibition

Saturday 23rd June to Sunday 24th June 2018

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Mingara Recreation Club

12/14 Mingara Dr, Tumbi Umbi NSW 2261

Entry is for TLAS & Mingara Orchid Club Members Only.

Dates and Times you need to know

Thurs 31st May 2018 - Deadline for receipt of Entry Forms

(May be handed in at the TLAS Members Meeting in May)

Friday 22nd June - Receiving Artwork at Mingara Recreation Club From 11am on

Unsold works to be collected after 3.00pm on Sunday 24th June

Details

Entry Fee for TLAS Members: \$10.00 for four paintings

Entry Fee for Mingara Orchid Club Members: \$15.00 for 2 paintings or \$25.00 for 4 paintings *(includes full TLAS Membership)*

Bank details: BSB:112 879 A/C Number: 041 284 038 A/C Name: TLAS

Post Entry Form to:

The Exhibition Co-ordinator, PO Box 4288, Bay Village NSW 2261

CONDITIONS OF ENTRY:

- **AN ENTRY FEE OF \$10 IS PAYABLE TO BE SENT WITH THE ENTRY FORM.**
- **PAINTINGS EXHIBITED MUST BE ABLE TO FIT IN AN AREA EQUAL TO A METRE BY A METRE.**
e.g. 1x1 large or 2 Medium, or 3 or 4 small. The number of paintings per member **MAY HAVE TO BE DECREASED** due to space limitations, so please **LIST YOUR PAINTINGS NUMERICALLY IN YOUR ORDER OF PREFERENCE FOR HANGING.**
- The paintings must be the original work of the artist or an acknowledged legal copy.
- Ensure the wire/cord for hanging is loose enough for handling..
- The commission for sale of artworks is 20%. (10% goes to a nominated charity)
- Entries will be accepted from **TLAS financial members and Mingara Orchid Club Members only.**
- Paintings must be signed by the artist, dry, properly framed, and ready to hang.
- The artist's name, title, medium and price must be printed on the back.
- While utmost care will be exercised, neither Tuggerah Lakes Art Society Inc.nor its members will be held responsible for insurance, loss or damage to any artwork. Insurance is the responsibility of the entrant and signing of the entry form shall signify acceptance of these and other conditions of entry.
- The Exhibition Committee reserves the right to reject any artwork for whatsoever reason without obligation to specify the reasons for such rejection.
- We may allow artworks on display to be reproduced by media.

Reminder: Entry Forms and Entry Fee must be received by Thursday 31st May 2018
Post to The Exhibition Co-ordinator, PO Box 4288, Bay Village NSW 2261

For Further Information contact Tammy Briggs:

Mobile: 0426 176 990

Email: secretary@tlas.org.au



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Entry Form

Mingara Orchid Fair & Art Exhibition:
 Saturday 23rd June and Sunday 24th June 2018
 At Mingara Recreation Club

PLEASE PRINT CLEARLY USING CAPITAL LETTERS

First Name Last Name

Address

..... Postcode

Telephone Mobile

ENTRIES: ORIGINAL PAINTINGS ONLY

Please list your paintings in order of preference of acceptance of paintings as some paintings may have to be omitted due to numbers of entries and limited hanging space.

FRAMED WORK

	TITLE OF FRAMED WORK	SIZE	MEDIUM	PRICE	SOLD	REC NO
1						
2						
3						
4						

Roster: Expressions of interest of availability to man the stalls. The organising committee will allot the times to members who have indicated availability and make contact.

(Please tick roster below if you are available)

	Saturday	Sunday
9.00am to 1.00pm		9.00am to 12.00pm
1.00pm to 4.00pm		12.00pm to 3.00pm
Please tick box if you are able to assist with setting up and taking down of the Exhibition.		

I have delegated to deliver/collect my painting/s
 I agree to the conditions listed and certify that I am the artist and the paintings entered are my original works.

(1) My ABN is (2) I am a Hobby Artist (CROSS OUT 1 or 2)

I agree that I am willing to take responsibility for the handling of a sale, including monetary transactions.
 If not I forfeit the opportunity to exhibit. (NOTE: Entrants will never have to be solely responsible for sales.)

I enclose my payment of \$..... for entry fees. Tick if *cash* *cheque/MO* *direct bank deposit*
 (BSB:112 879 A/C Number: 041 284 038 A/C Name: TLAS) (Orchid Society Members, please reference 'surname')

Signature Date PLEASE PRINT NAME

Number of paintings collected by Artist/Agent TLAS Officer SignatureDate



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Unframed Work

*These will be displayed on a counter rack, not hung on the screens.
The rack is unsuitable for unframed canvases.*

PLEASE PRINT CLEARLY USING CAPITAL LETTERS

	TITLE OF UNFRAMED WORK	SIZE	MEDIUM	PRICE	SOLD
1					
2					
3					
4					

Cards

*These will be displayed on a card rack.
Please attach a small removable sticker with price and artist reference which can be removed at the point of sale.*

PLEASE PRINT CLEARLY USING CAPITAL LETTERS

	TITLE/CODE	PRICE	SOLD
1			
2			
3			
4			
5			
6			
7			
8			
9			

I have delegated to deliver/collect my unframed painting/s and cards.
I agree to the conditions listed and certify that I am the artist and the work entered is my original work.

(1) My ABN is (2) I am a Hobby Artist (CROSS OUT 1 or 2)

Signature Date PLEASE PRINT NAME

Number of unframed paintings and cards collected by Artist/Agent TLAS Officer Signature Date