

GALLERY EXHIBIT INVENTORY FORM

Print ALL Clearly



redlands

ART ASSOCIATION www.redlands-art.org

215 E. State St
Redlands CA 92373
909-792-8435

Artist's Name _____

Exhibit Dates _____

PROCEDURE:

1. Before submitting art, each item must be clearly marked with Artist's Name, Title, Medium, Size, and Price on the back.
2. Put an RAA number tag on each item and record it in the first column of this sheet, and your own inventory number, if any, in second column.
3. Complete this Inventory Form,
4. Sign up on the calendar for your gallery docent dates,
5. Pay the clerk.

Categories	Limit	Fee
(A) Wall Hanging	3	\$ 10.00
(B) Large Sculpture	3	\$ 10.00
(C) Table- Small items:		
Glass-Ceramic-Fabric- Etc.	10	\$ 10.00
Small Framed art .	5	\$ 10.00
(D) Matted Work	10	\$ 10.00
(E) Cards	n/a	\$ 5.00
(F) Jewelry	10	\$ 10.00
(G) Patio Items	3	\$ 10.00

Docent Fee - if not being a docent in the gallery \$ 15.00

TOTAL FEES = \$

THIS IS YOUR RECEIPT OF FEES PAID

Receipt # _____ () Credit Card () Cash () Check # _____

RAA # at take-in	Your own I.D. #	Item Name / Title	Item Size	Category	Medium - Circle the R if a Reproduction	Price \$	Date Sold or Removed. Receipt #
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		
					R		

By signing below you acknowledge that you have been given a Gallery Agreement, have read, understand and agree to the regulations and the fee schedules stated herein. You understand that as Consignor, you are responsible for attending (or providing an attendant) as a docent for the Gallery for one time slot per exhibit.

Gallery docent dates can be scheduled Monday through Saturday
AM Shift = 11 AM to 1:30 PM
PM Shift = 2 PM to 4:30 PM

Artist Signature **X** _____ Date _____

Address _____

City _____ Ph: () _____

Email _____

Gallery Docent Date

Shift: circle one: AM or PM

MARK THIS DATE ON YOUR CALENDAR!

FORM REVIEWED BY _____ ART REVIEWED BY _____