



ARTWORK ID LABEL

Complete and sign this label, and securely attach it to your artwork.

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

ARTWORK TITLE: _____ Sale Price or NFS _____
(The CVA charges a 40% commission on artwork sales. Price your work accordingly.)

Will you pick up this piece by 3:00 pm on August 27, 2022? Yes _____ No _____
If no, complete the following:

I authorize _____ to pick up my work. This person has agreed to pick it up by 3:00 pm on August 27, 2022.

Disclaimer: I am aware that every precaution will be taken to keep my artwork safe and secure. I understand that the Association of Wisconsin Artists is not responsible if my work is damaged or stolen, and that the CVA insurance will only cover my work while it is at the CVA, and only if I returned the completed and signed form with my artwork.

I will provide my own insurance for this exhibition if desired.

All work must arrive ready for hanging or installation. Only side-to-side wire may be used for hanging (no single nail clips or saw tooth hangers.) Work left at the Center for the Visual Arts after August 27 will be discarded.

Signature of participant: _____ Date: _____