



**ARTISTS OF MINNESOTA
 SPRING SHOW 2018 REGISTRATION
 Show dates: May 18-20, 2018**

Registration Fee (\$25) \$ _____

Saturday a.m. Breakfast
 (\$12.50) plus Guest _____ \$ _____

Saturday Lunch
 (\$19.50) plus Guest _____ \$ _____

Banquet - Chicken Marsala
 (\$32) plus Guest _____ \$ _____

Banquet - Center Cut Pork Chop
 (\$35) plus Guest _____ \$ _____

Sunday Brunch
 (\$23.50) plus Guest _____ \$ _____
(See menu details below)

Saturday Glensheen Tour
 (\$15, or \$14 for 62+) \$ _____

Members' Choice Award
 donation (optional) \$ _____

Member Dues 2018
 (\$25 if not already paid) \$ _____

Fill out and include the Membership form

TOTAL \$ _____

Name _____

Address _____

City/Zip _____ Phone _____

Email _____

Guest name(s) _____

Registration Deadline: April 28, 2018

(must be postmarked by this date)

Make check payable to Artists of Minnesota and send to:

Sue Chapin, P.O. Box 43, Carlton MN 55718

Email: suebrowncapin@gmail.com

Please complete and sign entry information on bottom of this form.

*If you are including your member dues with this registration be sure to

Fill out and include the membership form.

Menu Details

(If you prefer, there is an on-site restaurant, and also many restaurants in nearby Canal Park.)

Saturday breakfast:

Muffins, Danish, Yogurt,
 Coffee.

Saturday lunch:

Soup, 1/2 Club Sandwich,
 Strawberry Shortcake,
 Assorted Beverages.

Saturday banquet:

Chicken *OR* Pork Entrée,
 Caesar Salad, Garlic Mashed
 Potatoes, Grilled Asparagus,
 Tiramisu.

Sunday brunch buffet:

Scrambled Eggs, Bacon,
 Sausage, French Toast, Fruit,
 Danish, Muffins, Assorted
 Beverages

Attach the labels below to the back of your paintings.

Price (incl. sales tax) \$ _____

Entry #1 _____

Title _____

Category # _____ Media _____

Name _____

Address _____

City/Zip _____ Phone _____

Email _____

Price (incl. sales tax) \$ _____

Entry #2 _____

Title _____

Category # _____ Media _____

Name _____

Address _____

City/Zip _____ Phone _____

Email _____

ENTRY REGISTRATION
(Spring Show, 2018)

Name _____

Entry #1 (Please Print)

Title _____

Category # ____ Media _____ Price* _____

Entry #2 (Please Print)

Title _____


Category # ____ Media _____ Price* _____

*Include tax with price or indicate NFS (Not For Sale) or SA (See Artist)

I understand that the Pier B Resort Hotel and others involved with the Spring Show will exercise due caution with my work, but shall not be liable for any damage or loss of my work. I verify that my painting/art work is original and recent. If I am unable to deliver or retrieve my work from the show myself, I have designated the following person to do so on my behalf.

(Designated person's name) _____

Signed _____ Date _____

Membership Form	2018 Membership \$25	
	Name _____	Address _____
	City/State/Zip _____	County _____ Phone _____
	Email _____	Website _____
	Amount enclosed \$ _____	New _____ Renewal _____
<i>Make check payable to Artists of Minnesota and send to: Sue Chapin, P.O. Box 43, Carlton MN 55718</i>		

*Attach the labels below to the back
of your paintings.*

Entry #1 Price (incl. sales tax) \$ _____

Title _____

Category # ____ Media _____

Name _____

Address _____

City/Zip _____ Phone _____

Email _____

Entry #2 Price (incl. sales tax) \$ _____

Title _____

Category # ____ Media _____

Name _____

Address _____

City/Zip _____ Phone _____

Email _____