

**Artists of Minnesota Spring Show, May 20 - 22, 2022
Registration (must be postmarked by May 2)**

(Please print clearly.)

Name _____

Address _____

City/Zip _____ Phone _____

Email _____

Guest(s) names _____

IF ENTERING ARTWORK fill out info below. Enter a price (inc. tax) if you want it listed in program, otherwise state NFS=Not For Sale OR SA=See Artist.

Entry #1 Title _____

Category # _____ Media _____ Price _____

Entry #2 Title _____

Category # _____ Media _____ Price _____

I understand that Park Event Center 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: _____

By signing below, you verify that information on this form is correct and you agree to all terms:

(signed) _____ Date _____

Please fill out as applicable:

Registration Fee (\$25) \$ _____

Saturday Lunch
(\$18) plus Guest _____ \$ _____

Banquet - Chicken Parmesan
(\$30) plus Guest _____ \$ _____

Banquet - Slow Roasted Beef
(\$31) plus Guest _____ \$ _____

Banquet - Pasta Primavera
(\$25) plus Guest _____ \$ _____

Sunday Brunch
(\$23) plus Guest _____ \$ _____

Please check if attending these free activities:

_____ Art Activity at Park Event Center

_____ Richard Bresnahan Studio visit
at St. John's University

Members' Choice Award

Donation (optional) \$ _____

Member Dues 2022
(\$25 if not already paid) \$ _____

(Please fill out the membership form below and include it with registration).

TOTAL DUE \$ _____

**PLEASE FILL OUT ALL
INFORMATION AND SIGN.
RETURN THIS PAGE:**

**Make check payable to
Artists of Minnesota.**

**Send registration and payment to:
Sue Brown Chapin, P.O. Box 43,
Carlton, MN 55718**

(Questions? Contact Sue at 218-565-2359 or
by email at suebrownchapin@gmail.com).

***PAINTING TAGS, to be attached to
the back of your artwork,
are included on another page.***

Artists of Minnesota 2022 Membership Form \$25

Name _____

Address _____

City/State/Zip _____

County _____ Phone _____

Email _____

Website (if applicable) _____

_____ NEW _____ RENEWAL Amt. Enclosed _____

**EITHER include this form with Show Registration (if attending), OR mail it
to: Dawna Erickson, P.O. Box 161244, Duluth, MN 55816**