

September 24-25, 2011
BEACON OPEN STUDIOS
 REGISTRATION FORM



Name: _____ Phone: _____
 Home Address: _____ email*: _____

 Studio Address: _____ *We will be contacting you mainly via email for all
 (This will appear on BOS Map) _____ Open Studios updates and announcements
 website: _____

I am interested in finding a space to share with another artist for Open Studios

I have space that I can share with another artist

The organizers of Open Studios will do our best to assist artists in finding a temporary or shared space to show their work for the weekend of Open Studios but **we do not guarantee or provide studio space for artists**. It is ultimately each artists' responsibility to find and pay for their studio space.

Medium*:

- painting drawing sculpture printmaking photography
 mixed media installation digital media other:

* For use on website. Please check no more than 3 categories.

Registration fees: Fees and forms must be received by these dates

Standard Registration: April 1-July 15 \$30 with volunteer commitment
 \$60 with no volunteer commitment

Late Registration: July 16-Sept 9 \$75 (late registrants will **NOT** be included on the map)

Volunteer commitment: there are a limited number of volunteer positions available on a first come first served basis. Once all positions are filled all registration fees are subject to the non-volunteer rate.

I understand that as a participant of Beacon Open Studios I take full responsibility for any damage, lost or stolen items and any accidents that may occur at my studio or property as a result of participating in Beacon Open Studios. BOS and BACA assume no responsibility for the value of any artwork, damage, theft, or personal injury to myself or to others. I agree to have my studio open to the public during the hours specified by BOS on the weekend of September 24-25, 2011

Signature: _____ Date: _____

MAIL TO:
 BACA
Attn: BOS
 PO Box 727
 Beacon, NY 12508

DROP OFF IN PERSON
 (Wed - Mon, 12-6pm)
 River Winds Gallery
 172 Main Street
 Beacon, NY12508

OR



Please make check Payable to BACA