

ARTWORK DONATION REQUEST FORM

Artist: _____

Organization: _____

Contact Person: _____

Address: _____

Email Address: _____

Phone Number: _____

Website: _____

Tax Exemption Status: _____

Event Description: _____

Artist commission from donation sale (check one): 50% 30%

Description of 'exposure' for participating artists (i.e. artists will be listed in all press announcements, electronic and printed invitations, and on the organizations website/fundraising event page for maximum visibility.):

Event date and venue location: _____

Date needed and drop-off location: _____

Donation Parameters
(i.e. size limitations, average value, and medium(s) accepted):

Artwork return process (if the work does not sell): _____
