

West Bay Open Studios

NEW ARTIST APPLICATION

Please provide information as you would like it to appear in marketing materials.

Artist Name: _____

Returning Tour Artist since 2018 or earlier? Yes _____ **No** _____

**Business Name
(if different):** _____

Which name for marketing materials? _____

Home Address: _____

Studio Address: _____

Requesting Space at WCFA? Yes _____ **No** _____

Which address for tour hosting/marketing materials? _____

E-mail: _____

Website: _____

Phone: _____

Medium: _____

Art Affiliations: _____

**How would you like to be listed
(painter, sculptor, photographer, etc.)** _____

Referred by: _____ **Retail Sales Permit #:** _____

Committee Interested In: ___ **Planning** ___ **Publicity** ___ **Distribution** ___ **Advertising**

Specific role interested in? _____

Signature: _____ **Date:** _____

By signing, you are agreeing to the requirements in the Prospectus & Agreement.