

ASU GAMMAGE  
REQUEST FOR ART EXHIBIT  
Fall 2008 through Spring 2009

Artist or Art Group: \_\_\_\_\_

Group Coordinator: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Day (\_\_\_\_) \_\_\_\_\_ Alternate (\_\_\_\_) \_\_\_\_\_

FAX (\_\_\_\_) \_\_\_\_\_

E-mail address: \_\_\_\_\_ Website: \_\_\_\_\_

Art Medium: \_\_\_\_\_

Number of pieces proposed for exhibit: \_\_\_\_\_

Amount of display space your artwork requires: \_\_\_\_\_

Dimension of your work: \_\_\_\_\_

Is there a time when the art will **not** be available for exhibit: \_\_\_\_\_

Does your artwork require any special display conditions?      Yes      No

If Yes, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you exhibited at Gammage before?    Yes    No    If yes, when \_\_\_\_\_

**For consideration, please submit with this completed request form, no more than ten (10) slides representative of the artwork proposed for exhibit and any additional information about the artwork, artist or art group to:**

ASU Gammage  
Visual Art Exhibits  
P.O. Box 870105  
Tempe, AZ 85287-0105  
Information (480) 965-6912  
www.asugammage.com

**DEADLINE FOR ALL ENTRIES: Friday, March 14, 2008**