



Paint Staunton Quick Draw Art Competition

Sign me up for **Paint Staunton Quick Draw Art Competition** on Saturday, April 29, 2017

I am a/an Amateur Artist Professional Artist Artist 16 and under

Payment Options:

Amateurs and Professionals \$15 each Artist 16 and under—FREE

I would like to become a member of the Beverley Street Studio School:

Single \$40/year Family \$60/year Student \$20/year **TOTAL:** _____

Check in and late registration begins Saturday, April 29 at 8:00 am in the Sunspots Pavilion, across the street from Sunspots Studios, 202 S. Lewis Street. Bring up to three (3) canvasses to be stamped for participation in this event. At check in, you will receive three blank price tags for use in pricing the paintings for sale.

The painting competition begins at 9:30am and ends at 12:30pm. At 12:30pm, bring your paintings back to the Sunspots Pavilion. Judging begins at 12:30 pm and ends at 1:30 pm. You can display and sell up to three (3) pieces of artwork created during the competition during the Fresh Paint Sale that begins at 2:00pm. Only one piece of art will be considered for judging. That piece must be presented on an easel provided by you. The one or two additional pieces available for sale (created during the competition) can be placed on the ground at the base of your easel.

Please pick up all paintings at 3:00 pm after the Fresh Paint sale has concluded.

Paint Staunton Quick Draw Art Competition will occur rain or shine. No refunds will be offered. The Beverley Street Studio School is not liable for any damage, losses, injuries or other unforeseen problems that may occur to materials, art, or artists during the event.

I (the artist) understand that the sale of all artwork will be subject to a 40% commission and Virginia sales tax. BSSS representatives will process all sales and the School will mail a check to you within two weeks. I fully agree to the above terms and conditions regarding Paint Staunton Quick Draw Art Competition.

Signature

Date

Contact Details

NAME _____

ADDRESS _____

CITY _____ STATE _____

ZIP _____

PHONE : Cell Phone () _____

____ Home ____ Work () _____

Email _____

OFFICE USE ONLY:

Date: _____

Paid by: CASH CK # _____ VISA MC AMEX

Exp. Date _____

CCV Code: _____