



## EXHIBITION APPLICATION

### **1. YOUR CONTACT DETAILS**

Name: \_\_\_\_\_

If you are applying on behalf of a group

Group Name: \_\_\_\_\_ Medium: \_\_\_\_\_

Have you ever exhibited at the MIDFLORIDA Event Center Art Gallery?      Yes      No

If so, When? \_\_\_\_\_

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

Telephone: [h] \_\_\_\_\_ [w] \_\_\_\_\_ [c] \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Social Media site address: \_\_\_\_\_

### **2. EXHIBITION OPTIONS**

Your preferred time of exhibition (month, year):

Choice 1: \_\_\_\_\_ Choice 2: \_\_\_\_\_ Choice 3: \_\_\_\_\_

I/We would prefer to exhibit alone (solo/group)

I would prefer to participate in a Dual exhibition

### **3. YOUR PROPOSAL**

Please include a statement summarizing the theme or description of the exhibition/ residency and your body of work; what you hope to achieve by exhibiting your artwork and your aims/expectations of the exhibition. Please refer to the MIDFLORIDA Event Center Art Gallery Exhibition Application Terms and Conditions for further information on what to include in your proposal. Please provide your Proposal as a separate document and submit with this form.

### **4. SUPPORT MATERIAL**

Please include in your application:

6 –10 images of your current work in print, on a CD OR attach a picture on the image list including medium, size and indicative pricing levels (please provide 1-3 images for each artist in the case of a group exhibition proposal).

your artist BIO and/ or statement (please provide a BIO/ statement for each artist in the case of a group exhibition proposal plus a group biography/summary)

copies of any previous exhibition catalogues, reviews and/or articles

**5. AGREEMENT TO THE MID FLORIDA EVENT CENTER ART GALLERY EXHIBITION CONDITIONS**

I agree to the terms and conditions outlined in the Port St. Lucie Art Galley Exhibition Application Conditions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed form with all requested materials  
to:  
MIDFLORIDA Event Center  
Mallory Hanes, Event and Service Coordinator  
9221 SE Event Center Place, Port St. Lucie, FL 34952  
Telephone: (772) 807-4488 Fax: (772) 398-2944