# ORYCON 29 ART SHOW (NOVEMBER 16-18 2007)
# REGISTRATION FORM

Artist Name _____ Agent Name _____
Address _____ Address _____
Phone (day) _____ Phone (day) _____
(evening) _____ (evening) _____
Best time to call: _____ Best time to call: _____
e-mail address _____ e-mail address _____

Status: ☐Amateur ☐Professional ↔ Make checks payable to: _____

☐ My art will arrive with: me; my agent; by mail; by UPS; by Fed-Ex; or by _____

☐ Please return artwork to: me; my agent; by mail; by UPS; by Fed-Ex; or by _____

Please provide a brief description of your artwork, such as pen & ink astronomical, watercolor horror, stained glass robots, Lucite masks, Minbari head crest decorations, etc.

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I wish to reserve the following space (**maximum total of 3 panel and/or table units per artist).**

_____ panels (4' x 4') at $15 each totaling: $_____

_____ table units (4' x 2½') at $15 each totaling: $_____

☐ "Print Shop" - a maximum of 20 pieces per artist at $5.00 per artist. ($5.00) $_____

☐ I am sending my artwork by mail/UPS/etc. Enclosed is the handling fee. ($15.00) $_____

☐ I have enclosed payment for membership in Orycon 29 $_____
($35 until June 30th, $45 until October 31st)

**Total amount enclosed for art show reservations, handling postage and memberships $_____**

**Please make checks payable to Orycon 29. Please do not send cash.**

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Please check all appropriate items, use the space below to be specific and attach extra sheets if needed.

☐ I will allow credited press photography of my artwork. [No photos without your permission.]
☐ I will allow the Orycon 29 Art Show to give my address to buyers requesting it at the Art Show.
☐ I will allow the Orycon 29 Art Show to share my address with other conventions.
☐ I would like to have my email address/website posted on the Orycon 29 Art Show website.
☐ I would like to help with the Art Show during the convention.
☐ I will be bringing display cases for my 3-dimensional artwork and/or jewelry (highly recommended).
☐ I have special display needs for my artwork-floor space, electricity, etc. Please specify below.
☐ I am interested in participating in art-related programming-panels, workshops, demonstrations.

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If you have any questions or comments, please feel free to include them with this form. Please return this form along with your payment to:
**Orycon 29 Art Show c/o Melvin Krehbiel, 7582 SW Hunziker Rd. #29 Tigard, OR 97223**

**REMINDER:THIS RESERVATION FORM WILL NOT BE ACCEPTED UNLESS ACCOMPANIED BY A SIGNED RELEASE FORM.**