

**PLEASE COMPLETE, PRINT AND ATTACH THIS FORM TO THE DROPPED OFF ARTWORK**



**DAVIDSON  
COUNTY**

## STUDENT ART EXHIBIT

**GRADES 6-12**

FRIDAY, NOVEMBER 3, 2023

6:00PM –8:00PM

ARTS | THEATRE 202

**ART DROP OFF DATES:**

OCTOBER 26 & 27 11AM - 1PM

AND 4PM - 6PM

(PICKUP FROM SCHOOL AVAILABLE UPON  
REQUEST)

**ART PICK UP DATES:**

NOVEMBER 6 & 7 11AM - 1PM

AND 4PM - 6PM

(DELIVERY TO SCHOOL AVAILABLE UPON  
REQUEST)

### TEACHER INFORMATION

Teacher Name:

Teacher Email:

School Name:

School Number:

School Address:

### ALL ARTWORK MUST MEET THE FOLLOWING GUIDELINES:

- ENTRIES MUST BE MOUNTED
- ENTRIES MUST BE LABELED ON THE FRONT OF THE ART (USING THE LABEL PROVIDED)
- ENTRIES MUST BE ABLE TO BE HUNG ON A WIRE SYSTEM
- ENTRIES MUST BE NO LARGER THAN 16" X 24"
- TEACHERS ARE RESPONSIBLE FOR ENSURING ONLY ORIGINAL IMAGES ARE INCLUDED.

### ART TEACHER AGREEMENT:

I UNDERSTAND AND AGREE TO THESE STUDENT ART EXHIBIT TERMS PERTAINING TO THE ARTWORK LISTED. ARTS DAVIDSON COUNTY AND ARTS | THEATRE 202 STAFF AND VOLUNTEERS MAY ACCEPT, INSTALL, AND EXHIBIT ARTWORK FOR PUBLIC DISPLAY; MAY PROVIDE REASONABLE SAFETY AND SECURITY; WILL NOT BE HELD LIABLE OR RESPONSIBLE FOR ANY DAMAGE TO OR LOSS OF ARTWORK; MAY MAKE IMAGES AND AUTHORIZE MEDIA OUTLETS TO MAKE IMAGES FOR MARKETING AND/OR PUBLICITY.

\*\*IF NOT ADEQUATELY PREPARED FOR DISPLAY, ARTWORK WILL BE WITHDRAWN FROM THE EXHIBITION. ARTS DAVIDSON COUNTY RESERVES THE RIGHT TO REFUSE ANY SUBMISSION THAT IT DEEMS UNACCEPTABLE.

TEACHER SIGNATURE:

DATE:

TEACHER NAME .....

SCHOOL .....

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TEACHER NAME: .....

SCHOOL .....

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