

Dear TVAA Artists,

“The self portrait. A window into the artist’s mind? Emotions? Perceptions? Is it internal from the artists point of view? Is it what we see in ourselves or what we wish others to see in us? I have always believed the eyes are the windows to what is possibly the most wonderfully frightening aspect of ourselves. Our minds. Self portraits are an attempt to reveal one’s self to others while trying to hide from one’s self. The truth may be revealing or may be concealing. Denial. Understanding. Fear. Humor. Deceit. Grace. Arrogance. Honesty. Tragedy. Truth. What is real for the artist may be a different reality to others. I’ll show you mind if you’ll show me yours. “
-Zane Steadman, Curator

Opening day is **Monday, January 10**. *See attached calendar for important days to remember.*

We ask that you please submit up to 3 art pieces with the largest dimension not to exceed 36” or one piece with the largest dimension between 36” – 60” ***completed within the last two years...***

- professionally presented (framed, matted, etc.),
 - ready-to-hang (2D, secure wire or hanging apparatus attached that supports the weight of the piece) ***or*** ready-to-display (3D, pedestals will be provided),
 - and labeled with name, phone number, and title (2D artwork on the back and 3D art where convenient)
- **Art work that does not meet these requirements will not be allowed in the show.**

Also please include the following to be compiled into a portfolio that will be on display during the exhibition...

- a current one-page vita, and
- a current one-page artist statement, including a statement about your self portrait (100 words or less to be displayed with your portraits).

You are responsible for delivery and pickup of your artwork. Your work is fully insured by the college as soon as it is received at the gallery, but we must have the attached insurance form on file.

If you have any questions, please contact
Zane Steadman at z_jr@sbcglobal.net, Curator
or **Betty Siber** at bsiber@collin.edu, Gallery Director
or **Andrea Holmes** at aholmes@collin.edu, Gallery Assistant
or theartsgallery@collin.edu

<http://www.collin.edu/THEARTSGallery/>

We look forward to displaying your work!

Important Dates to Remember...

Thursday - Saturday	Dec. 16 – 18,	2:00 p.m.	deadline for delivering artwork to gallery
Tuesday-Saturday	Jan. 3 - 5	all day	show will be hung
Monday	Jan. 10	9:00 a.m.	show opens
Thursday	Jan. 20	4:00 – 7:00 p.m.	reception
Saturday	Jan. 29	2:00 p.m.	show closes
Monday - Wednesday	Jan. 31	9:00 a.m. to 8:00 p.m.	pickup art at the gallery *Best times for parking 1 – 8 p.m.

December						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16 Drop off Work	17 Drop off Work	18 Drop off Work
19	20 Gallery Closed	21	22	23 Campus Closed	24	25
26	27	28	29	30	31	

January						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
						1
2	3 Show to be hung	4 Show to be hung	5 Show to be hung	6 All College Day Private Viewing	7	8
9	10 Show Starts Classes Start	11	12	13	14	15
16	17	18	19	20 Reception 4 - 7p.m.	21	22
23	24	25	26	27	28	29 Show Ends
30	31 Pick Up Art	1 Pick Up Art	2 Pick Up Art			



HALL WALLS gallery
I & II
Spring Creek Campus
Visual Arts Wing (Bldg. A)



By signing this agreement, made on the _____ day of _____, 20_____, I acknowledge and agree to the following conditions with regard to artwork listed below and on subsequent pages.

I hereby, fully and finally, release and will not hold Collin County Community College District, herein referred to as CCCCDC, its directors, officers, employees and any volunteers involved with the project responsible for damage or loss to any artwork during the time of the exhibition, installation, or subsequent storage and that I am aware that insurance policies covering damage and theft will be in effect as soon as artwork is received on the premises of CCCCDC. The transport of artwork is not covered by insurance.

Additionally, I agree that I will not remove these artworks from display until the official ending day without written permission from the Director of Galleries of CCCCDC.

NAME (PLEASE PRINT) _____

ARTIST SIGNATURE _____

PHONE NUMBER (WITH AREA CODE) _____ EMAIL ADDRESS _____

NAME OF EXHIBITION _____

For listing and labels (please print LEGIBLY):

PIECE #1

PIECE #2

TITLE _____

TITLE _____

MEDIUM _____

MEDIUM _____

DIMENSIONS (in inches; if framed, please put framed size) _____

DIMENSIONS (in inches; if framed, please put framed size) _____

Value of artwork for insurance and listing. \$ _____

Value of artwork for insurance and listing. \$ _____

Check if not for sale. We do NOT do PRICE ON REQUEST!

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PIECE #3

TITLE _____

MEDIUM _____

DIMENSIONS (in inches; if framed, please put framed size) _____

Value of artwork for insurance and listing. \$ _____

Check if not for sale. We do NOT do PRICE ON REQUEST!

For additional titles, please attach Additional Works Exhibited List(s) (AWEL).

RECEIVED BY (GALLERY REPRESENTATIVE) _____



HALL WALLS gallery I & II

Spring Creek Campus Visual Arts Wing (Bldg. A)



Guidelines for Exhibitors

By signing this agreement, made on the _____ day of _____, 20_____, I acknowledge and agree to the following guidelines with regard to artwork I will be exhibiting in

NAME OF EXHIBITION

SHOW DATES

- 1. No artwork will be accepted for exhibition that is not mounted properly and considered ready to display and/or hang.
2. No artwork will be accepted that is not completely dry and/or completely finished.
3. Special exhibition pedestals, cases or stands that are required for individual pieces of ceramic, sculptural or other 3-D work must be provided by the artist.
4. Collin County Community College will insure artwork that is displayed in secured spaces only with an exhibitor contract.
5. Collin County Community College will insure and pay for one way (usually the return route) of the shipping cost on a carrier of our choice.
6. The artwork must be retrieved immediately after the closing of the exhibition. Artwork will not be stored and will not be protected if left on the premises after the closing of the exhibit.
7. If an honorarium is to be given, the artist should provide the director of galleries with their social security number or tax I.D.
8. The artist must complete an insurance form before delivery of artwork. (Preferably no later than two [2] weeks before exhibition opening).
9. Collin County Community College will furnish a post card invitation in black and white or color at CCCC's descretion.
10. The director of galleries will do all possible to advertise the exhibition, but cannot guarantee that all/any newspapers will print the story or listings.
11. The gallery director will distribute flyers and send out mailings (i.e. personal mailing list of artist, CCCC faculty, mailing list of patrons).
12. Any sales of work will be handled directly between the artist and the interested party.
13. Copyright laws will be strictly enforced, however, should another party infringe on these rights, CCCC will not be held responsible.
14. This is a teaching gallery. Exhibitors will be requested to attend a reception and in some cases discuss their artwork with the patrons of the CCCC gallery.
15. It is the right of the gallery director to refuse to exhibit any work that is deemed under the standards of the agreed upon artwork. Upon arrival of the actual work, the exhibition may be cancelled or pieces deleted due to poor quality of work, misrepresentation, or artwork not previously agreed upon.

PRINT ARTIST'S NAME

X ARTIST'S SIGNATURE

RECEIVED BY (GALLERY REPRESENTATIVE)



HALL WALLS gallery I & II
Spring Creek Campus
Visual Arts Wing (Bldg. A)



Release for Publishing Works on Website

By signing this agreement, made on the _____ day of _____, 20_____.

I hereby give Collin County Community College District (CCCCD), their successors and assigns and those acting under their permission or upon their authority or those by whom they are commissioned, the unqualified right and permission to publish on the college's website (cccd.edu) photographs and/or images of artwork I have created. I hereby waive the opportunity or right to inspect or approve the finished photograph or image.

I do hereby release the said CCCC and their successors and assigns of and from any and all rights, claims, demands, actions or suite which I may or can have against them on account of the use of publication of said photographs or images.

NAME (PLEASE PRINT)
PHONE NUMBER (WITH AREA CODE)
EMAIL ADDRESS
MAILING ADDRESS
ARTIST SIGNATURE X

If the artist is a minor, a parent or guardian must fill out the following information and sign.

I, the undersigned, being the parent or guardian of the above artist, do hereby for valuable consideration consent to the above release and signature thereto.

PARENT/GUARDIAN NAME (PLEASE PRINT)
PHONE NUMBER (WITH AREA CODE)
EMAIL ADDRESS
MAILING ADDRESS
PARENT/GUARDIAN SIGNATURE X

Witnessed by: _____
COLLIN COLLEGE REPRESENTATIVE'S SIGNATURE

Printed name: _____