

Ocean View Chamber of Commerce  
JURIED FINE ART SHOW ENTRY FORM PAGE ONE  
— **SUBMIT AS SOON AS POSSIBLE** —

OVCC PO Box 6710 Ocean View, HI 96737 (808) 939-8449 www.ovchamber.com

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**ARTIST CONTACT INFORMATION**

Artist Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

**ARTWORK INFORMATION**

Approximate size of each entry:

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

Please bring appropriate displays that show your artwork to its best advantage.

check here if you will bring table-top displays

check here if you will bring free-standing floor model easels or other displays

Specify: \_\_\_\_\_

check here if you need to make any special arrangements, such as for oversized artwork.

**ARTIST INSTRUCTIONS**

Because of the short time frame available for show set up we are asking artists to pre-register. This will be a tremendous help to art show volunteers who are striving to make this a successful show for everyone.

Please complete and submit page one of this form as soon as possible.

Do not send in page two. Please complete page two and bring it with you on September 8 to expedite your check-in.

To pre-register you may submit page one by:

1) Mail to the Chamber address above

OR

2) Fax to 929-8772

OR

3) Email equivalent data in your own words to [suzanne@dixstudios.com](mailto:suzanne@dixstudios.com)

Artists may contact Suzanne with questions: [suzanne@dixstudios.com](mailto:suzanne@dixstudios.com) or 929-7113.

**Thank you for pre-registering!**

FOR OFFICE USE ONLY

DATE RECEIVED BY OVCC
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Ocean View Chamber of Commerce Juried Fine Art Show  
**ENTRY FORM PAGE TWO — BRING TO SHOW**

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Artist NUMBER To be assigned by art show volunteer at check-in.

**ARTIST CONTACT INFORMATION**

Artist Name \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

Art show volunteer staff will endeavor to handle your artwork with the utmost care, however artist takes full responsibility for any damage or loss of work submitted.

Signature \_\_\_\_\_

**To help expedite your check-in and set up**, prepare the labels below.

**Before you arrive:** Complete the information.

**At the show:** Art show volunteer will assign you a number during check-in. Cut along solid lines, fold along dotted lines. Secure labels near artwork with “side one” facing out. After judging, before reception, art show volunteer will turn labels so “side two” is facing out.

**SHOW INFORMATION**

Date: Friday, September 8, 2006

Place: Ocean View Community Center on Leilani Circle

Schedule: Artist set up is at noon, reception and art sale from 5:00 to 8:00 p.m. Artists must be present to take down their displays.

Juried by: Hiroki Morinoue of the Donkey Mill Foundation for Culture and the Arts.

First place featured on the 2007 Business Directory cover, plus 1/8 page color ad inside directory.

Second and third place will each receive 1/8 page color ad inside directory.

Entry fee: \$10 for up to three pieces of artwork.

Sale of artwork during the reception will result in a donation of 10% of the selling price to the Chamber.

**Artist preparation:**

Theme is “Scenic Ka`u” and all mediums will be accepted (painting, drawing, sculpture, photography, quilting, etc.).

Please bring appropriate displays that show your artwork to its best advantage.

There will be tables available for table-top displays.

If you will be bringing free-standing floor model easels or other oversize displays please let the art show staff know by checking the box on page one or by sending an email to [suzanne@dixstudios.com](mailto:suzanne@dixstudios.com)

_____ Price _____ Medium _____ Title _____ Artist Name _____ SIDE TWO ----- SIDE ONE ARTIST number to be assigned by art show volunteer at check-in <input style="width: 100%; height: 20px;" type="text"/> ARTWORK letter <input style="width: 50px; height: 30px; text-align: center;" type="text" value="A"/>	_____ Price _____ Medium _____ Title _____ Artist Name _____ SIDE TWO ----- SIDE ONE ARTIST number to be assigned by art show volunteer at check-in <input style="width: 100%; height: 20px;" type="text"/> ARTWORK letter <input style="width: 50px; height: 30px; text-align: center;" type="text" value="B"/>	_____ Price _____ Medium _____ Title _____ Artist Name _____ SIDE TWO ----- SIDE ONE ARTIST number to be assigned by art show volunteer at check-in <input style="width: 100%; height: 20px;" type="text"/> ARTWORK letter <input style="width: 50px; height: 30px; text-align: center;" type="text" value="C"/>
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