

**North Hills Art Center**  
**3432 Babcock Blvd.**  
**Pittsburgh, PA 15237**  
**412-364-3622**



**GALLERY EXHIBITION POLICIES**

By signing this contract, you are legally bound to all terms below. Failure to comply with these terms will result in legal action. For the purpose between the parties concerned, the following agreement is made and signed. The undersigned agrees to the following:

1. No accepted piece will be removed from the show for any reason during the dates of the show. Substitutions of work can only be made with the written approval of the NHAC Staff. The art center retains the right to reject artwork that is deemed inappropriate.
2. By signing below the artist gives the NHAC the right to use any piece from the show for publicity purposes (photos) so long as proper credit is given the artist. In accordance with federal and international copyright law, copyright remains the sole property of the artist.
3. The NHAC claims a 30% commission from the sale of any piece during the exhibit, whether sold by a NHAC Staff or the artist.
4. The NHAC accepts responsibility for publicity and the exhibit program.
5. The NHAC is not responsible for any damage, loss or theft from the exhibit.
6. The NHAC and show exhibitors who volunteer are responsible for the refreshments at the Opening Reception.

**ENTRY INFORMATION (PLEASE PRINT)**

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

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

Email address: \_\_\_\_\_ Phone: \_\_\_\_\_

- ❖ Are you interested in bringing an appetizer, dessert or wine to the Opening Reception? Yes
- ❖ Can you help set-up before the Opening Reception? Yes
- ❖ Can you help clean-up after the Opening Reception? Yes

*If you are able to help, you will be contacted with more information prior to the Opening Reception.*

**THIS IS HOW THE PLACARD WILL APPEAR WITH YOUR WORK**  
**\*\*PLEASE PRINT. PLEASE FILL OUT COMPETELY**

	<b>Title</b>	<b>Medium</b>	<b>Price/NFS</b>
1.			
2.			
3.			

Signature (Drop Off): \_\_\_\_\_ Date: \_\_\_\_\_

Signature (Pickup): \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only**

Number of Entries: \_\_\_\_\_ Entry Fee: \$9 Member, \$12 Non-member

Total entry fee due:  
 \$ \_\_\_\_\_

Method of payment: \_\_\_\_\_ Invoice # \_\_\_\_\_

Check # \_\_\_\_\_