



APPLICATION FOR REVIEW OF ARTWORK

Thank you for your interest in the Rotating Art Program at DHMC. We currently have six different spaces where we feature the work of local and regional artists. Exhibitions rotate every three months, beginning in September, December, March and June. All exhibitions are installed by the artist, in consultation with the Arts Program Coordinator. Work may be for sale—sales occur between the artist and the purchaser with 25% of the proceeds donated by the artist to the DHMC Arts program. This donation is tax-deductible.

If you are interested in being considered for an exhibition, please fill out this form and mail, along with images of your work or a website where they may be viewed and a list of your previous exhibitions/resume to: **Elisabeth Gordon, Arts Program Coordinator, DHMC Arts, One Medical Center Drive, Lebanon, NH 03756.**

Name: _____

Mailing address: _____

Phone number: _____

Email address: _____

Website address: _____

Medium: oils acrylics pastels photographs sculpture other: _____

Attachments: slides DVD prints portfolio resume/bio

After review, please do _____ do not _____ return my materials.