



The Royal's Partners in Art Initiative



Date of Submission: _____

Name of Artist (as it will appear on labels): _____

Address: _____ Postal Code: _____

Telephone number: _____ E-mail address: _____

Titles of Art Work and Media	Price	NFS	Sold
1)			
2)			

I am aware that the works which I have submitted are being considered for display and that submission, of itself, is not a guarantee that the works will be chosen to be displayed. Furthermore, I am aware that the art will be displayed in public areas of The Royal. I will not hold the hospital, nor the *Partners in Art Initiative Committee*, responsible for any losses or damages that may result.

The *Partners in Art Initiative Fund* will take a 20% commission on any works sold. The commission will be used to provide financial assistance for art courses and/or materials for participants in need. Works that are not for sale are eligible for entry.

I agree to contribute a portion (20%) of the sale of my art to the Partners in Art Initiative fund.

Yes No *Without this agreement, art will be displayed but not sold.*

Received by: _____ Signature: _____

Artist: _____ Signature: _____

Additional Information: All the artist's details must be indicated on the back of each piece of art (*name of artist/phone number/piece of work*). Any artwork not picked up within 6 months of the designated date will become the property of Partners in Art.

Date: _____ Title of Art: _____

Art returned by: _____ Signature: _____

Art returned to: _____ Signature: _____

Date: _____ Title of Art: _____

Art returned by: _____ Signature: _____

Art returned to: _____ Signature: _____