SUFFOLK ART LEAGUE'S ANNUAL OPEN MEMBERS' SHOW JUNE 18 – JULY 19, 2024

SUFFOLK ART GALLERY 118 BOSLEY AVE., SUFFOLK, VA 23434

Eligibility	Members may show up to two works. Non-members may join at time of delivery. Original works in any media are eligible, provided they have been completed within the past two years and have not been shown at the Suffolk Art Gallery. Two-dimensional works should be ready for hanging (that is, works on paper under glass, framed, with wire for hanging – saw tooth hangers will not be accepted). Finished gallery wrap is acceptable. Pedestals will be provided for 3-D works. Work will be displayed on a first-come basis until all space is filled.						
Submission Of Works	Bring artwork with attached lal following dates: Saturday, June 8 from 10:0 Tuesday, June 11 from 10:0	00 a.m. – 2:00 p.:	•				
Return of Works	Pick up artworks on Tuesday , July 23 between 9:00 a.m. – 6:00 p.m. Artwork not picked up within 30 days becomes the sole property of Suffolk Art League.						
Sales	Suffolk Art League will retain 30% consignment on works sold. Please include this in the "price". All work must remain on display for the duration of the show.						
Delivery							
Name	L11(•					
Phone (Day)	(Evening)		Email				
	Title	Medium	Price (Value*)	Sold	Picked Up		
#1							
#2							
	C CC II A . I						
202	Suffolk Art League 4 Open Members' Show		Suffolk Art League 2024 Open Members' Show				
Artist:		Artist:					
Title #1:		Title #2: _					
Medium:		Medium:					

Price (Value*): ____

Affix to Artwork

Price (Value*):

Affix to Artwork

 $[\]ensuremath{^*}$ For insurance purposes, we must have a value for work even if they are not for sale $\ensuremath{^*}$

SUFFOLK ART LEAGUE P.O. BOX 1086 SUFFOLK, VA 23439-1086

Return Service Requested

NON-PROFIT ORGANIZATION
U.S. POSTAGE
PAID
SUFFOLK, VA
PERMIT NO. 3183

MEMBERSHIP

MEMBERSHIP LEVELS

	□ Lifetime/Individual: \$1000	□ Fellow: \$550 - \$999/yr	
	□ Patron: \$350 - \$549/yr	□ Donor: \$150 - \$349/yr	
	□ Friend: \$75 - \$149/yr	□ Family: \$50/yr	
	□ Individual: \$40/yr	□ Student \$35/yr	
Name:			
Address:			·
Phone:	Emai	il:	
	n this form with your check made out to: So		
i icase iciui	•	O. Box 1086	
	3	uffolk, VA 23439-1086	