## Artist Contract for Chestertown RiverArts Gallery Exhibitions

		RA Member:	∃Yes □ No	
ARTIST NAME (PLEASE PRINT)				
EMAIL ADDRESS			PHONE NUMBER	
ARTWORK Items submitted by artist for show:				
Title	Medium	Price	Fee Paid	
By signing this form I agree that I have r and will adhere to the policies therein.	ead and understand the M	Memorandum of Under	standing belo	
Artist Signature		Date _	Date	
RiverArts Gallery Representative		Date		

## **Memorandum of Understanding**

- I understand that Chestertown RiverArts will handle the sale of the work, charge the appropriate sales tax, and divide the sale 65% to the artist and 35% to Chestertown RiverArts. \*Please note this when pricing items.
- I agree to keep the works on display at the *Chestertown RiverArts* gallery for the full time indicated on page one of this contract and will be responsible for picking up the work on the scheduled pick-up dates or making an alternative arrangement when special circumstances apply.
- During the time my work remains at *Chestertown RiverArts*, I agree that *Chestertown RiverArts* will not be responsible for any damage to the work not covered under *Chestertown RiverArts*' existing insurance, and agree that this insurance only covers the cost of the materials and not the perceived value of the work.
- I agree that any other type of insurance for these works of art (i.e. perceived value) may be carried by me at my own discretion and cost.