

**University of California, Irvine
Student Center and Event Services
Art Exhibit Interest Form
Viewpoint Gallery**

Contact person: _____

Name of sponsoring organization: _____

Mailing address (or department zot code): _____

Phone: _____ Cell phone: _____ Email: _____

Have you exhibited in the Viewpoint Gallery before? NO YES If yes, what year? _____

Exhibit name: _____

Description of the scope of the exhibit:

Name(s) of artist(s): _____

Number of pieces: _____

Dates requested for exhibit: _____

Drop off date of artwork: _____ Pick up date of artwork: _____

Artist must submit CD's, PowerPoint slides, photographs, color copies or prints of actual works and must complete the attached Exhibit A.

Important Information

- Student Center and Event Services cannot provide security for the exhibit unless requested.
- The University of California accepts no responsibility for loss or damage to the exhibits at any time while in the Student Center or during transportation/storage to, from, and within the Student Center.
- The Exhibitor must sign an Exhibit Agreement before the display is installed.

Please complete the information in Exhibit A on the next page.

