

**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: _____

Area(s) requested: Wall space only Floor space only Wall and floor space

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 (**change to "a Reservation Contract"**) before the display (**change to "the exhibit"**) is installed.

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

