



VISITING ARTIST APPLICATION

Please complete form, save as [Yourname.pdf] and email along with images of your work to: CrotonRiverArts@gmail.com.
Or print completed form, and mail along with printed images to: Croton River Artisans Gallery, 9 Old Post Rd S, Croton, NY 10520.
Please note: This form requires Adobe Acrobat Reader to complete. [Click here](#) to download.

Name: _____

Mailing Address: _____

Telephone: _____

Email Address: _____

Business Name (if applicable): _____

Website: _____

Social Media Handle(s): _____

Art Media: _____

Describe Your
Art Background: _____

Describe the
Art You Make: _____

Range of Art Sizes: _____

Price Range: _____

Exhibitions: _____

Display Requirements: _____

Comments: _____