



ARTIST APPLICATION





ARTIST APPLICATION

More than just Sculptures, art can be comprised of any medium. Rock Falls Tourism Department is seeking artists to showcase their work in the September 3, 2022 Art in the Park Sculpture Walk event. We want to help you show off your talents!

This is a *free* opportunity for artists to display and sell their artwork, and network with the community. The Art in the Park event will be held Saturday, September 3rd from 2pm to 6pm. Artists will be given a space within the park where they may display their work, and a time to set up between 10am and 1pm. More information will be given closer to the event date for specific setup locations. Space is limited and will be assigned on a first come first serve basis.

We are looking for any original handcrafted works of art including paintings, metal sculpture, pottery, clay, gourd art, stained glass, photography, carved wood, jewelry, baskets, yard art, and more. We also encourage art demos at your space for the public to view.

To reserve a space, artists will need to fill out the application and the attached waiver, as well as submit an image of the work they would like to display. Please contact the Tourism office for additional forms for Sculpture Walk submissions. Submission deadline is August 19, 2022.

Submit applications to:

Rock Falls Tourism
Attn: Melinda Jones
603 W 10th Street
Rock Falls, IL 61071

email: director@visitrockfalls.com
phone: (815) 622-1106

Please call or email with any questions about the application and submission process.



ARTIST APPLICATION

Please submit image of artwork in addition to this application.

ARTIST OR GROUP NAME:	
ADDRESS:	
WEBSITE/FACEBOOK PAGE:	
CONTACT NUMBER:	EMAIL ADDRESS:

DESCRIBE YOUR ART WORK / MEDIUM:

HOW MANY PIECES ARE IN YOUR DISPLAY? DIMENSIONS?
--

SIGNATURE

DATE

Exhibit Rules & Artist's Waiver Form

I (please print), _____ agree to the following:

I acknowledge that my property, including, without limitation, any art or other items on display (collectively to be known as the "Property") may be damaged, lost or stolen during the exhibition of or during the unpacking, packing or transportation of and I acknowledge and understand the risk involved by allowing such property to be displayed at an event hosted by the "City" (acknowledged as the City of Rock Falls located at 603 W. 10th St., Rock Falls, IL 61071).

I understand that the City does not insure the Property and if I so choose, I must acquire my own insurance. If I choose such Insurance, I agree to submit a copy to the City.

I understand that I am responsible for the hanging or display of any Property and must get prior approval of any signage from the City.

The term of the Exhibition begins when the Artwork(s) are delivered to the event location, and shall run through the agreed upon Exhibit end date, plus a period of no longer than seven business days for the Artwork(s) to be reclaimed. If the property is not claimed within seven business days after the Exhibit end date, I acknowledge the property may be considered abandoned.

The City has the absolute right, in its sole discretion, to remove or to relocate any Property. The City acknowledges, however, that it must inform the Property Owner(s) of any such change within 48 hours.

I agree that I will have a period of no longer than seven business days to remove any and all property from the City if the City chooses to terminate the exhibition before the specified exhibit end date.

By signing this waiver, I hereby agree to indemnify and hold the City, its elected officials, employees or representatives, harmless from any type of intellectual property infringement, including but not limited to patent, copyright or trademark infringement.

By signing this waiver, I also agree to waive any personal injury or property damage claim, nor in the future, that I may suffer as a result of the "exhibition", and I agree to indemnify and hold the City, its elected officials, employees or representatives, harmless from any personal injury or property damage claim, now or in the future, that I may suffer or cause at the "exhibition".

By signing this waiver, I further grant permission to the City to use photographs and or video of my work, or myself, in publications, news releases, online or social media postings, for the purpose of advertising the City of Rock Falls, events, or all purposes related thereto.

I hereby represent and warrant that I have read this Artist Waiver Form in its entirety and fully understand its contents. I have signed the waiver voluntarily and on my own free will. By signing this waiver, I release and hold harmless the City, its elected officials, employees or representatives from and against any and all claims of injury or damages relating to the above provisions.

Name & Signature: _____

Date: _____

Director's Name/Signature: _____

Date: _____

Display and Exhibit Policy (with application & waiver)

City of Rock Falls

Name (i.e. Artist, institution, or Organization):

Representative overseeing installation on site (if not the same as above):

Address: _____

City: _____ State: _____ Zip: _____

Phone (Home): _____ Phone (Cell): _____

Email address: _____

Exhibit Start Date: _____ Exhibit End Date: _____

Type of Art or Exhibit and Title:

Number of works on display: _____*

*Please write below or attach list of all Artwork or Objects to be displayed (Artist's Property)