



Fee  
Paid

Yarmouth Art Guild  
Post Office Box 235  
South Yarmouth, MA 02664  
www.yarmouthartguild.com

## EXHIBIT ENTRY FORM

Must be filled in completely.

Type or print.

\* Artist .....

Address .....

City .....

State ..... Zip .....

Tel. No. ....

\* Title .....

Medium .....

Price \$ .....

Pick up Date ..... Time .....

.....

*For Juried Show Only*

*accepted ..... not accepted .....*