



**Walter Anderson Museum of Art
 "Young at Art"
 Peter Anderson Festival Art Market for Kids
 Saturday, November 2, 2019**



Name: _____

Address: _____

City: _____ Zip: _____

Phone: (____) _____ Email: _____

School: _____

Description of Medium(s):

Fee: Free to artists 8 – 18 years old (with or without a table)
Table Size: 3 feet x 6 feet
Total space allotted: 5x10 feet (booths must be shared by a minimum of 2 students and up to 4)

Electricity is not available

If you do not have a table please check here: _____

You will have to provide your own canopy for the festival. We will have some tables available.

Do you have a particular person you would like to share a booth space with?

EXHIBITION: The exhibit will open 9AM on November 2nd, 2019 on the first day of the Peter Anderson Festival and will close on the same day at 3PM. All of the art must be original and created by the student selling it. WAMA will provide the tables at the students request.

Works must adhere to general community standards; WAMA reserves full curatorial rights (works cannot contain lewd or rude content.)

INSURANCE: All accepted works will be insured while on WAMA premises. Artists whould indicate insurance value on the entry form.

Application Due by October 10, 2019.

Mail to: Walter Anderson Museum
 Att: Young at Art
 510 Washington Avenue
 Ocean Springs, MS 39564

Email to:
 amanda@walterandersonmuseum.org

DELIVERY OF WORKS:

Students are responsible for setting up and breaking down their own booth on the day of the event. WAMA will not be responsible for collecting artwork or funds associated. Students maintain the right to keep 100% of the profit from the sale of their own work. Students under the age of 15 must be accompanied by an adult.

REPRODUCTION: Submission of an entry gives the Walter Anderson Museum of Art the right to reproduce accepted works for promotional and educational purposes.

Please contact the museum at 228.872.3164 or email any of the addresses above if you have questions.

Parent/Guardian Information:

Name: _____

Phone: (____) _____ Email: _____

Signature: _____ Date: _____