



ARTS COUNCIL of the Central Okanagan  
140-1735 Dolphin Ave, Kelowna, BC V1Y 8A6 ❖ Tel/ Fax: 250-861-4123  
E-mail: info@artsco.ca ❖ Website: www.artsco.ca

## APPLICATION FOR ARTSCAPE EXHIBITION

Arts Council of the Central Okanagan

Date: \_\_\_\_\_

Artist or Group Representative: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

Membership Expiry Date: \_\_\_\_\_

*\* all Artscape artists must be members of the Arts Council of the Central Okanagan*

*\* if membership expires during selected exhibition time, membership must be renewed prior to hanging.*

*\* all Group members who exhibit must be individual members of the Arts Council of the Central Okanagan*

**Venue Choice:** \_\_\_\_\_

*If the Kelowna Community Theatre, or the Kelowna Art Library, I understand that I will be required to give a short (15 minute) public talk about my work.*

Please provide the following with your application:

- Six (6) samples of your work (images or photos)
- Description of the mediums and dimensions of each piece
- You resume if available
- Artist's statement
- Dates and history of exhibitions

Date Application Received: \_\_\_\_\_

Date Applicant Notified: \_\_\_\_\_