

LABELS FOR REVERSE SIDE OF ARTWORK- Please affix to the reverse of your artwork. PLEASE NOTE: Incomplete or illegible forms may result in your work not being hung.

Main Street Gallery 258 Main Street Ansonia, CT 06401

ARTIST NAME: _____

TITLE (if applicable): _____

MEDIUM _____ **PRICE:** _____ **DATES OF EXHIBIT:** _____

Telephone number where you can be reached: _____

Email address: _____

May we use a photo of this piece for our website or advertising? _____

Are you willing to submit this piece to our traveling art show? _____

If your piece sells, do you want it to remain hanging for duration of exhibit _____

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