



"Art OUT Loud - Peekskill" Prospectus – June 2021

Artists are invited to submit artwork (prints, paintings, sculptures, ceramics, photographs, and videos) that visually explore, investigate and examine the diversity of gay, lesbian, bisexual, transgender, and queer experiences. We are especially interested in works that:

- bear witness to the many aspects of the LGBTQIA+ personal and communal experiences
- evoke awareness to LGBTQIA+ issues as well as contemporary art and artists
- inspire others to create, participate, and connect

Peekskill Pride believes that exhibiting artwork created by Artists that are both queer, and allies of the LGBTQIA+ community, will contribute to the appreciation for, and the ongoing development of a multicultural perspective that includes the Lesbian, Gay, Bisexual, Transgender, and Queer experience.

Submissions will be lightly juried. Artists are asked to submit up to **five** images, consider including a short statement, 2-3 sentences, related to each specific image for possible inclusion in the exhibition. Statements are not required. Please send information or questions to wvmorel@gmail.com, or call 914 643 4392

IMPORTANT DATES - to jot on your calendar

- Exhibition: May 31st through July 27th
- DROP OFF OF ARTWORKS: Wednesday, May 27th, 2:00 – 6:00
- PICK UP OF ARTWORKS: WEDNESDAY, JULY 29, 2:00 – 6:00
- Location: Sun River Health's Jeannette J. Phillips Health Center, 1037 Main street, Peekskill NY 10566

Art Work

One framed work from each artist must be wired for hanging.

Identification - Please attach artist name, title of work, medium, price, and artist contact information to front and back of work (info. on front will be removed after installation).

Forms - Drop off completed Submission Form and Disclaimer/Liability forms along with your art. Forms are below.

35% commission will be taken, price should be accordingly



ARTWORK SUBMISSION FORM

Name and date of show

Artist's Name: _____

Phone #: _____

1. **Title** _____

Medium _____ Type of Discipline _____

Dimensions: Height _____ Width _____ Depth (if applicable) _____

Price* _____

2. **Title** _____

Medium _____ Type of Discipline _____

Dimensions: Height _____ Width _____ Depth (if applicable) _____

Price* _____

3. **Title** _____

Medium _____ Type of Discipline _____

Dimensions: Height _____ Width _____ Depth (if applicable) _____

Price* _____

DISCLAIMER / LIABILITY FORM

Name and date of show

Artist's Name: _____

DISCLAIMER AND LIABILITY:

I understand that there is no insurance for damage or loss. The Peekskill Arts Alliance and/or _____, its officers, directors, employees, agents, or volunteers will not be responsible for loss, theft, breakage, or damage to any artworks submitted.

I will be responsible for dropping off and picking up my work within the dates and times outlined in the Artists Prospectus or have someone pick my work up for me.

I understand that I will receive 65 % of each sale.

Signature: _____

E-mail Address: _____

Phone: _____

Cell Phone: _____

Designated pick-up person if other than yourself: _____

