



ART SHOW
October 25th and 26th, 2008

REGISTRATION FORM
(Please print)

Name: _____

Surname _____

Address _____

Postal Code _____

Telephone _____

E-MailAddress: _____

Website: _____

Medium _____

Included is my cheque payable to COLORIS SUR LA BAIE in the amount of \$150.00 (non refundable in the event of a cancellation by the artist).

I will not hold Coloris sur la Baie and its organizers responsible for the cancellation of the art show for reasons beyond their control such as fire, epidemic, etc. Furthermore, I will not hold Coloris sur la Baie and its organizers responsible for the loss, theft, vandalism, damages to any of my works of art and equipment.

I, _____, the undersigned, have read the document entitled 'Applicable Criteria during the Art Show' dated 15-12-07 issued for the 3rd edition of Coloris sur la Baie and agree to abide by them.

Signature _____

Date _____

**Mail to: COLORIS SUR LA BAIE
3093 Lemay Circle
Rockland, Ontario K4K 1A9**

For further information please contact:

**Gilles Yelle : 613.446.2121
infor@colorissurlabaie.com**