



Owning Your Abilities Application

Artist Name: _____ Age: _____

Artist Statement (*tell us about yourself, the type of art you like to make, anything you feel is important for us to know about you. If your work is selected, this statement will be posted at the exhibition and online*):

Work One

Title: _____

Medium: _____

Dimension: _____

Dollar value: _____

if you would like Project Insight to determine this value, please leave it blank.

Work Two

Title: _____

Medium: _____

Dimension: _____

Dollar value: _____

if you would like Project Insight to determine this value, please leave it blank.

Work Three

Title: _____

Medium: _____

Dimension: _____

Dollar value: _____

if you would like Project Insight to determine this value, please leave it blank.

By signing this document, you understand that Project Insight bears no responsibility to any work damaged on our property or at the exhibition site.

Signature: _____