

Salinas Valley Art Gallery

Page 1: Instructions for membership submissions:

1. Print all 6 pages.
2. Fill-in pages 3 through 6.
3. Place pages 3 through 6 in a sealed envelope with the following address:
Salinas Valley Art Gallery (attn. Screening Chair)
318 S Main St
Salinas, CA 93901
4. Mail the envelope or drop it off at the gallery as you prefer.

You will be contacted by the Screening Chair.

Salinas Valley Art Gallery

Page 2: Membership Information

To be considered for membership in the Salinas Valley Art Gallery, an artist owned and operated cooperative, we will need the following:

1. Six original works of art, ready for hanging or display, with a price list. Artwork to be juried needs to be in the gallery before the second Friday of each month. If your work is accepted, and there are no current openings, you will be placed on a wait list.
2. There is a three month probationary period to make sure you and the gallery are a "good fit".
3. You are required to work at least two shifts per month, which total seven hours per month.
4. Monthly dues of \$75 per month are due on the first of each month. There is a one-time non-refundable entrance fee of \$75.
5. We ask for a one-year commitment.
6. If you have any questions please contact our recruitment chairperson Elsie Dill at: (831) 758-7805.
7. Salinas Valley Art Gallery pays you 65% of the sales price when your work sells. The gallery's commission is 35%.

THANK YOU FOR CONSIDERING THE VALLEY ART GALLERY

Salinas Valley Art Gallery Application

PAGES 3-5 Actual Application

Valley Art Gallery

218 Main Street, Salinas, CA 93901

(831) 422-4162

salinasvalleyartgallery.com

salinasvalleyartgallery@gmail.com

Date:

Name:

Phone: (Home)

Address:

Phone: (Cell)

Your E-mail address:

1. Medium which you are submitting for jurying:
2. Price range of work:
3. How long have you been working in this medium?

Salinas Valley Art Gallery Application

PAGE 4 (Application continued)

4. Do you work in other media?

5. Art training:

6. Are you currently taking any classes?

7. Have you exhibited your work in juried shows or galleries? Please list them.

8. Have you received any awards? Please list the awards.

9. Would you be able to work as a staffer in the gallery at least two shifts per month?

Salinas Valley Art Gallery Application

PAGE 5 (Application continued)

10. Would you be willing to sign a one year membership agreement?

11. Would you pay the one-time \$75 entrance fee?

12. If accepted there is a ninety day trial membership agreement.

13. Are you able to meet the monthly dues obligation?

14. How did you hear about the gallery?

15. Do you have any retail experience?

Date Juried:

Date Accepted:

Salinas Valley Art Gallery Application

PAGE 6 Acceptance and Liability Agreement

NAME: _____

ADDRESS: _____

EMAIL: _____

MEDIA: _____

The initial term of membership shall be for a 3 month period. During this time either party is free to end the agreement at their discretion. As a member I agree that upon acceptance of this application, Valley Art Gallery may screen my work in all art media for showing and selling in the Gallery located at 218 Main Street, Salinas. Valley Art Gallery will charge a commission on all sales.

I am assured that the Gallery will take every precaution to protect my work while in the Gallery's possession. However; I realize that the individuals and/or the Valley Art Gallery assume no financial responsibility for accidental damage, breakage or theft of individual art work. I understand that the Gallery does not carry theft insurance but does carry insurance for personal liability and major loss due to fire and resultant water damage.

SIGNED: _____

DATE: _____

Application accepted

By _____,

Date: _____