

SAGEFENCON

Art Show Short Form Application



Contact Information:

Name: _____

Business Name: _____

Address: _____

City: _____ State: _____

Zip: _____ Phone: (____) _____

Email: _____

Website or Social Media Contact Info: _____

Short Description of Art:

Type of Space Needed:

#	Space	Price*
_____	4' x 4' flat	\$15
_____	3' x 2 ½' table	\$25
_____	3' x 3' floor space	\$20

**Space and membership fees due dates will be sent to you when your application is confirmed as accepted.*

Power Needs? Yes No

Sagefen Inc. staff will only contact you about your application. Contact information is stored to protect your privacy and not shared with other organizations. Please see our complete privacy and Code of Conduct policies at sagefecon.org. Sagefen Inc. is a 501c3 non-profit organization. Contact Email: artshow@sagefencon.org