

## WORKS ON PAPER EXHIBITOR APPLICATION

JANUARY 10-14, 2018 | LA CONVENTION CENTER | SOUTH HALL

Gallery	Name:	
Gallery	Director/Owner's Name:	
Alterna	te Contact:	
Mailing	Address:	
City:	State: Zip Code:	
Telepho	one: Mobile Phone #: Fax:	
Email: Billing Email:		
Web ac	ddress:	
	APPLICATION DEADLINE: NOVEMBER 10	
PLEA	SE CHECK DESIRED BOOTH SIZE & EXTRAS	
	8' x 12' (2.4m x 3.7m includes 1 x 8' track) 8' x 16' (2.4m x 4.9m includes 2 x 8' track) extra outside wall (subject to availability /additional charge for lighting extra 8' light track (indicate # of additional tracks) catalog one page two page spread	\$4,889 \$6,520 \$288 \$414 \$525 \$945

Works on Paper Booths have 10' tall white papered walls. More colors available for an additional charge. Labor and custom paint can be provided at an additional charge.



#### **SHOW DETAILS:**

### JANUARY 10, 2018: OPENING NIGHT / SPECIAL ACCESS

OPENING NIGHT PREMIERE PARTY TICKETS:
Red Card Special Collector Preview: Invitation Only
Friend Level Ticket: \$125
Vanguard Level Ticket: \$200
Patron Level Ticket: \$250 Exclusive Patron Reception Area

### **GENERAL SHOW HOURS / TICKETING**

General Admission, One Day Ticket: \$30ThursdayJanuary 11, 201811AM-7PMFridayJanuary 12, 201811AM-7PMSaturdayJanuary 13, 201811AM-7PMSundayJanuary 14, 201811AM-5PM

WE PROPOSE TO EXHIBIT (CHECK ALL THAT A	APPLY):
Modern Contemporary	
Prints Drawing Pos	sters Photography
Please submit a list of the artists you plan to ex	chibit at the fair.
	of the artists you propose to exhibit, along with a document raphical information via email (info@laartshow.com), web link or send
Please list your galleries fair participation histor	ry over the last three years.
Who referred you to our show?	Phone

Please Note: This application is the first step in the contracting process: Approved exhibitors will be contracted under separate cover. No contract will be sent until exhibitor is approved by the selection committee of the LA Art Show.



# **APPLICATION FEE**

There is a non-refundable \$50 (US) application fee for all applying exhibitors. Please provide the following information:							
Billing Name:							
Billing Address:							
City:	State:	Zip Code:					
Credit Card Number			CRV:				
Credit Card Type:	Credit Card Expiration Date:						