



MODERN +  
CONTEMPORARY

## DESIGN LA ART EXHIBITOR APPLICATION

JANUARY 23- 27 2019 | LA CONVENTION CENTER | WEST HALL

Gallery Name:

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Gallery Director/Owner's Name:

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Alternate Contact:

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Mailing Address:

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City:

State:

Zip Code:

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Telephone:

Mobile Phone #:

Fax:

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Email:

Billing Email:

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Web address:

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### PLEASE CHECK DESIRED BOOTH SIZE

<input type="checkbox"/>	12' DIA	(1) 10'h x 4'w column	<b>\$5,933</b>
<input type="checkbox"/>	16' DIA	(2) 10'h x 4'w columns	<b>\$11,235</b>
<input type="checkbox"/>	20' DIA	(4) 4' walls with (2) 4' end caps	<b>\$16,538</b>
<input type="checkbox"/>	25' DIA	(4) 4' walls crossed by (4) 4' walls	<b>\$26,644</b>
<input type="checkbox"/>	30' DIA	(3) 10'h x 4'w columns	<b>\$36,750</b>

**Included in the booth cost:** White walls, track lighting, and one page in show catalog



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**SHOW DETAILS:**

**JANUARY 23, 2019: 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: \$30

Thursday January 24, 2019 11AM-7PM

Friday January 25, 2019 11AM-7PM

Saturday January 26, 2019 11AM-7PM

Sunday January 27, 2019 11AM-5PM

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**DESIGN SPACE**

Please describe below planned layout and design for your exhibit.

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Please submit no more than 10 JPEG images of the artists you propose to exhibit, along with a document describing the image details and artists' biographical information via email ([info@laartshow.com](mailto:info@laartshow.com)).

Please list prior shows that you have participated in.

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Who referred you to our show?

Phone

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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.



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## APPLICATION FEE

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There is a non-refundable \$100 (US) application fee for all applying exhibitors. Please provide the following information:

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Billing Name:

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Billing Address:

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City:

State:

Zip Code:

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Credit Card Number

CRV:

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Credit Card Type:

Credit Card Expiration Date:

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