



## FiberFest Artist Application

Artist Name: \_\_\_\_\_

Person filling out application (if different than above): \_\_\_\_\_

Mailing address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Website (if applicable): \_\_\_\_\_

I will be selling (check all that apply):

Textiles (specify type):  Hand Treated  Imported  Vintage  Commercial

Buttons  Beads  Trim  Other Embellishment: \_\_\_\_\_

Patterns  Kits  Tools and/or equipment: \_\_\_\_\_

Yarn and/or Roving  Threads  Books

Other: \_\_\_\_\_

Please describe what makes your product unique or the artistic process used to create it, if applicable: (use reverse side if more space needed): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Yes, I would be interested in overnight accommodations. Number in party: \_\_\_\_\_

Please attach one or more pictures showing examples of your product, including how it will be packaged and/or displayed.

I acknowledge by submitting this application that I understand and accept the terms stated on the reverse of this form.

\_\_\_\_\_

Signature

Date



Terms:

1. You are submitting an application to be considered as an artist for FiberFest 2019, to be held on Sat, April 27 from 4-6PM & Sunday, April 28, 10am to 4pm, 2019, with setup to occur on Saturday, April 27, 10am-3:30pm, 2019.
2. Upon application acceptance, you will provide the Museum with text describing your product, a brief bio, picture(s) of you and your products to be used for publicity. Product samples are desirable and helpful with publicity, if available.
3. You understand that this is a fundraising event and 30% of your gross sales will go to support the Pacific Northwest Quilt & Fiber Arts Museum.

Additional Notes:

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**For Internal Use Only:**

Accepted  Declined

Application Received:	_____	By:	_____
	Date		Name
Application Reviewed:	_____	By:	_____
	Date		Name
Artist Notification:	_____	By:	_____
	Date		Name
Publicity Materials Received:	_____	By:	_____
	Date		Name
Artist Sales Reconciliation	_____	By:	_____
	Date		Name
Gross Sales: \$ _____	Vendor: \$ _____	Museum: \$ _____	
Final Payment Date: _____	Check #: _____		