### Information for Exhibiting

Applying to Exhibit in the Windowpanes Exhibition at the Lockyer Valley Art Gallery

The Lockyer Valley Art Gallery is looking for applications to exhibit in the upcoming **Windowpanes** exhibition. This exhibition will bring together a variety of artists and artworks all working on the same theme **Windowpanes**. Imagine you are looking through a window (introspective or outward-looking), what do you see? What is your windowpane?

#### **Important Dates:**

- Wednesday 6 November, 9am Applications close
- Friday 15 November, 5pm Artists are notified of works selected
- Friday 29 November, 10am-2pm or Monday 2 December, 12pm-4pm Delivery of Artworks
- Thursday 5 December, 6pm Opening Function
- Friday 6 December 2024 to 26 January 2025 Exhibition dates
- Tuesday 28 January 2025, 9.30am-11.30am Collect Artworks

### Cost: \$35 per successful artist.

All 2D works must be ready for hanging, either framed or stretched canvas. Our hanging system requires two D-rings positioned 6cm from the top of the work.

Please complete the following form with as many details as possible. This information will be used to select the works for the exhibition and create the labels. If there are any changes before the exhibition, please let us know.

You are welcome to contact the Gallery on 5466 3407 or email <u>galleries@lvrc.qld.gov.au</u> to discuss any questions, or to receive assistance with completing the application.

Prior to proceeding, please confirm that:

- I understand the important dates and will have any selected works delivered as specified.
- I understand my 2D works must be ready for hanging and have referred to the <u>Art Gallery Guideline</u> for additional information.

| 0 | Yes |
|---|-----|
| 0 | No  |

#### Contact Details

\* indicates a required field

### **Privacy Notice**

We pledge to respect and uphold your rights to privacy protection under the <u>Australian</u> Privacy Principles (APPs) as established under the *Privacy Act 1988* and amended by

### 2024 Windowpanes Artwork Application

### Form Preview

**Applicant Details** 

the *Privacy Amendment (Enhancing Privacy Protection) Act 2012.* To view our privacy statement, go to <u>Lockyer Valley Regional Council - Privacy Policy.</u>

| Applicar      |                              |                             |                           |                          |
|---------------|------------------------------|-----------------------------|---------------------------|--------------------------|
| Title         | First Name                   | Last Name                   |                           |                          |
| Make sure     | you provide the sai          | ne name that is list        | ed in official documenta  | tion                     |
| Make Suite    | you provide the sai          | ne name that is list        | ed ili official documenta | tion.                    |
|               | (physical) addre             | ess *                       |                           |                          |
| Address       |                              |                             |                           |                          |
|               |                              |                             |                           |                          |
| Address Li    | ine 1. Suburb/Town.          | State/Province, and         | Postcode are required.    |                          |
| , (44, 655 E. | 1, 300010, 101111,           | state, i i o viii ee, aii a | r obtained are required.  |                          |
| Applicar      | nt phone numbe               | r *                         |                           |                          |
| Must be a     | n Australian nhana r         | umbor                       |                           |                          |
| Must be at    | n Australian phone r         | iumber.                     |                           |                          |
| Applicar      | nt email address             | *                           |                           |                          |
|               |                              |                             |                           |                          |
| Must be ar    | n email address.             |                             |                           |                          |
| Applicar      | nt website                   |                             |                           |                          |
|               |                              |                             |                           |                          |
| Must be a     | URL.                         |                             |                           |                          |
| Applicar      | nt Facebook                  |                             |                           |                          |
|               |                              |                             |                           |                          |
| Must be a     | URL.<br>profile, not persona | ıl profile                  |                           |                          |
|               |                              | ii promei                   |                           |                          |
| Applicar      | nt Instagram                 |                             |                           |                          |
| Must be a     | LIDI                         |                             |                           |                          |
|               | profile, not persona         | Il profile.                 |                           |                          |
| Do you k      | nave an ABN? *               |                             |                           |                          |
|               | complete details b           | elow                        | ○ No                      |                          |
| Planca a      | ntor vour APN                |                             |                           |                          |
| ricase e      | enter your ABN.              |                             |                           |                          |
| The ABN       | provided will be u           | sed to look up the          | following information     | n. Click Lookup above to |
|               | at you have entere           |                             |                           | .,                       |
| Information   | on from the Australia        | an Business Registe         | r                         |                          |

| ABN  |                                  |                        |
|--|----------------------------------|------------------------|
| Entity name  |                                  |                        |
| ABN status   |                                  |                        |
| Entity type  |                                  |                        |
| Goods & Services Tax (GST)   |                                  |                        |
| DGR Endorsed   |                                  |                        |
| ATO Charity Type   | More information                 |                        |
| ACNC Registration  |                                  |                        |
| Tax Concessions  |                                  |                        |
| Main business location   |                                  |                        |
| Must be an ABN.  |                                  |                        |
| <ul> <li>□ Aboriginal or Torres Strait Isla</li> <li>□ Young people (12 to 25 years</li> <li>□ Career stage - Emerging</li> <li>□ Career stage - Established</li> <li>□ First time exhibitor</li> <li>□ Not applicable</li> <li>At least 1 choice must be selected.</li> </ul> |                                  |                        |
| Artwork Details  |                                  |                        |
| * indicates a required field   |                                  |                        |
| Artwork 1  |                                  |                        |
| Up to three artworks can be sexhibition.   | submitted for consideration in t | the <i>Windowpanes</i> |
| Artwork Title *  |                                  |                        |
|  |                                  |                        |
| Artwork Medium *   |                                  |                        |
| e.g. Mixed - photography, watercolor   | ur, textile, sculptures          |                        |
| Artwork Statement for extend   | ded label/didactic. *            |                        |
|  |                                  |                        |
| Word count: Must be no more than 30 words.   |                                  |                        |

If your artwork statement doesn't include details, how does this piece address the theme Windowpanes?  $\mbox{\ensuremath{^{\ast}}}$ 

| Imagine you are looking through a window (introspective or outward-looking), what do you see? What is your windowpane?                 |
|--|
| Artwork Height in centimeters (including frame) *  |
| Artwork Width in centimeters (including frame) *   |
| Artwork Price for insurance purposes *   |
| Must be a dollar amount.   |
| Artist's price including Gallery's 20% commission (NFS if not for sale) *  |
| Artwork Image  |
| Before you attach your image, please rename them with your name and then the artwork name in the filename. E.g. John Smith Sunflowers  |
| Files must be .jpg or .png   |
| Artwork Image * Attach a file:   |
| A pointing up of 1 file pough he other had   |
| A minimum of 1 file must be attached. Files must be .jpg or .png. Recommended no more than 5mb per attachment                          |
| Image Credit *   |
| For each image supplied, please supply the image credit in the field above. eg. John Smith, Sunflowers - Image credit: A Photographer. |
| Do you wish to apply for a 2nd artwork to be included in this application? *  ○ Yes  ○ No  |
| Artwork 2  |
| Artwork Title *  |
|  |
| Artwork Medium *   |

Yes

| e.g. Mixed - photography, watercolour, textile, sculptures   |
|--|
| Artwork Statement for extended label/didactic. *   |
|  |
| Word count:<br>Must be no more than 30 words.  |
| If your artwork statement doesn't include details, how does this piece address the theme Windowpanes? *                                |
|  |
| Imagine you are looking through a window (introspective or outward-looking), what do you see? What is your windowpane?                 |
| Artwork Height in centimeters (including frame) *  |
| Artwork Width in centimeters (including frame) *   |
|  |
| Artwork Price for insurance purposes *   |
| Must be a dollar amount.   |
| Artist's price including Gallery's 20% commission (NFS if not for sale) *  |
| Artwork Image  |
| Before you attach your image, please rename them with your name and then the artwork name in the filename. E.g. John Smith Sunflowers  |
| Files must be .jpg or .png   |
| Artwork Image * Attach a file:   |
|  |
| A minimum of 1 file must be attached.<br>Files must be .jpg or .png. Recommended no more than 5mb per attachment                       |
| Image Credit *   |
| For each image supplied, please supply the image credit in the field above. eg. John Smith, Sunflowers - Image credit: A Photographer. |
| Do you wish to apply for a 3rd artwork to be included in this application? *   |

| ○ No  |
|---|
| Artwork 3   |
| Artwork Title *   |
|   |
| Artwork Medium *  |
| a a Miyad photography watercolour toytile coulptures  |
| e.g. Mixed - photography, watercolour, textile, sculptures  |
| Artwork Statement for extended label/didactic. *  |
|   |
| Word count: Must be no more than 30 words.  |
| If your artwork statement doesn't include details, how does this piece address  |
| the theme Windowpanes? *  |
|   |
| Imagine you are looking through a window (introspective or outward-looking), what do you see? Wha is your windowpane?                 |
| Artwork Height in centimeters (including frame) *   |
|   |
| Artwork Width in centimeters (including frame) *  |
|   |
| Artwork Price for insurance purposes *  |
| Must be a dellar angunt   |
| Must be a dollar amount.  |
| Artist's price including Gallery's 20% commission (NFS if not for sale) *   |
|   |
| Artwork Image   |
| Before you attach your image, please rename them with your name and then the artwork name in the filename. E.g. John Smith Sunflowers |
| Files must be .jpg or .png  |
| Artwork Image * Attach a file:  |

| A minimum of 1 file must be attach   |                         | Evolo vor ottoch vocat    |  |
|--|-------------------------|---------------------------|--|
| Files must be .jpg or .png. Recomm   | ended no more than      | omb per attachment        |  |
| Image Credit *   |                         |                           |  |
| For each image supplied, please su<br>- Image credit: A Photographer.                        | pply the image credi    | t in the field above. eg  | . John Smith, Sunflowers                         |
| Additional Information   |                         |                           |  |
| Installation Requirements - I<br>you will need.  | Please list any d       | isplay requirement        | ts/items you know                                |
|  |                         |                           |  |
| e.g. This exhibition includes 1 digitation power to display.                                 | al work. I will provide | a TV and USB. We will     | require a plyth and                              |
| Any Additional Information   |                         |                           |  |
|  |                         |                           |  |
| If you wish to supply video works to pages.  | support your applic     | ation, please insert link | s to external web                                |
| Acknowledgement and  | Feedback                |                           |  |
| * indicates a required field   |                         |                           |  |
| Acknowledgement  |                         |                           |  |
| This form is an application form review works, exhibitions, propogallery exhibition program. |                         |                           |  |
| I certify that to the best of n application are true and cor                                 |                         | e statements mad          | e within this                                    |
| I have read and completed all the required information in this application *                 | □ Yes □ No              |                           |  |
| Name *   | First Name              | Last Name                 |  |
|  |                         |                           |  |
|  |                         | e warrants they have th   | ves, the person entering ne authority to sign on |

| Contact phone number *  |                                     |  |  |
|---|-------------------------------------|--|--|
|   | Must be an Australian phone number. |  |  |
| Contact Email *   |                                     |  |  |
|   | Must be an email address.           |  |  |
| Date *  |                                     |  |  |
|   | Must be a date                      |  |  |
| Optional - Applicant Feedback   |                                     |  |  |
| You are nearing the end of the application process. Before you review your application and click the <b>SUBMIT</b> button please take a few moments to provide some feedback. |                                     |  |  |
| Please indicate how you found the online application process:  O Very easy  O Easy  O Neutral  O Difficult  O Very difficult  |                                     |  |  |
| Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.                           |                                     |  |  |