2025 Blanden Arts Festival

Event date: June 14, 2025 Event time: 9:00am - 4:00pm

Signature:



6'x30" Table Application - May 10, 2025

| APPLICANT NAME: | | | | | | |
|---|---|--|--|--|--|--|
| (Last) | (First) | | (Middle Initial) | | | |
| ORGANIZAT | CION NAME: (if applicable) | | | | | |
| ADDRESS: | | | | | | |
| (Street) | (City) | (State) | (Zip) | | | |
| PHONE NUM | IBER: | | | | | |
| Please provide a cell phone number that you can be reached at during the festival. | | | | | | |
| E-MAIL ADD | RESS: | | | | | |
| Acceptance a | and artist information will be communicated only via em | nail. Please include a frequently | monitored e-mail address. | | | |
| WEBSITE AI | ND/OR FACEBOOK LINK: | | | | | |
| IOWA SALE | S TAX NUMBER: (if applicable) | | | | | |
| Please note: if you do not have one, you may need to apply. See www.blanden.org for info. | | | | | | |
| DESCRIPTION OF WORK TO BE DISPLAYED: | | | | | | |
| Yes | ested in doing a demonstration of your work during the No stration will you be doing: | Art Festival at your booth/table | ? | | | |
| Ex | bmitted 5 digital images that best represent your work. ample: James_Smith_01.jpg. Images can be submitted ndenmemorial@gmail.com | | | | | |
| Submitted Table Fee: A 6' x 30" table inside the larger tent for \$40 each. \$30 for Blanden Art Museum Members and currently enrolled college students with an ID. Max 2 tables per artist. Indicate in the box number of tables requested. | | | | | | |
| Museum and including, wit acknowledge receipt and s their directors liability, cost limitation, and BCF, the | e and agree that participation in the 2025 Blanden Arts the Blanden Charitable Foundation (BCF), an Iowa no hout limitation, any art or other items on display (collect I am assuming the risk of loss of the Property by partiufficiency of which is hereby acknowledged, I agree to so, officers, employees, agents, and affiliates from any agree expense (including, without limitation, attorneys' fee or claims for damaged, lost or stolen Property. I further if directors, officers, employees, agents and affiliates, Museum and BCF may incur or suffer as a result of any | on-profit corporation involves the tively, the "Property"), may be discipating in the Activity. For good release and hold harmless the fand all liability for negligence or as) arising out of my participation agree to indemnify and hold har from any and all loss, damage, I | possibility that my property amaged, lost or stolen and I and valuable consideration, the Blanden Art Museum and BCF, any other claim, judgment, loss, in the Activity including, without mless the Blanden Art Museum iability, cost or expense that the | | | |
| | esent and warrant that I have read this Release and W elease and Waiver Form voluntarily and of my own fre | | ly understand its contents. I have | | | |

Date:

2024 Blanden Arts Festival

Event date: June 14, 2025 Event time: 9:00am - 4:00pm

ORGANIZATION NAME: (if applicable)

APPLICANT NAME:

(Last)



(Middle Initial)

10'x10' Booth Application – Due May 10, 2025

| ADDRESS: | | | | |
|--|--|--|--|--|
| (Street) | (City) | (State) | (| (Zip) |
| PHONE NUMBER: | | | | |
| Please provide a cell phor | ne number that you can be reached | at during the festival. | | |
| E-MAIL ADDRESS: | | | | |
| Acceptance and artist info | rmation will be communicated only | via email. Please include a | frequently mor | nitored e-mail address. |
| WEBSITE AND/OR FACE | EBOOK LINK: | | | |
| IOWA SALES TAX NUME | BER: (if applicable) | | | |
| Please note: if you do not | have one, you may need to apply. | See www.blanden.org for in | fo. | |
| DESCRIPTION OF WORK | CTO BE DISPLAYED: | | | |
| Are you interested in doing Yes No What demonstration will y | g a demonstration of your work duri | ing the Art Festival at your b | ooth/table? | |
| James_Smith_01.jpg. Ima Submitted Booth Fee | ages that best represent your work ges can be submitted via a CD, sa A 10' x 10' booth (you must provid d currently enrolled college students | ved on USB thumb drive, or le your own) for \$65 each. \$ | emailed to bla | ndenmemorial@gmail.com |
| Museum and the Blanden including, without limitation acknowledge I am assuming receipt and sufficiency of their directors, officers, en liability, cost or expense (illimitation, any claims for dand BCF, their directors, continuous and BCF, their directors, continuous an | that participation in the 2025 Bland Charitable Foundation (BCF), an lon, any art or other items on displaying the risk of loss of the Property be which is hereby acknowledged, I agriployees, agents, and affiliates from including, without limitation, attorned amaged, lost or stolen Property. I fufficers, employees, agents and affiliates from the property of the property of the property of the property. I fufficers of the property of the prope | owa non-profit corporation in (collectively, the "Property") by participating in the Activity gree to release and hold har any and all liability for neg ys' fees) arising out of my paurther agree to indemnify ar liates, from any and all loss, | nvolves the post, may be dama r. For good and mless the Blan ligence or any articipation in the d hold harmles damage, liabi | ssibility that my property aged, lost or stolen and I d valuable consideration, the den Art Museum and BCF, other claim, judgment, loss, he Activity including, without as the Blanden Art Museum lity, cost or expense that the |
| | rrant that I have read this Release have signed this Release and Waiv | | | l. |
| Signature: | | | Date: | |

(First)