



ARTIST APPLICATION FOR GALLERY MEMBERSHIP

Thank you for your interest in applying for membership. HQ Gallery is a venture of established and emerging artists who equally share the cost of business operation and the responsibility of staffing the gallery. Members volunteer time and effort in various roles to further our successful enterprise as a non profit gallery that provides display space for under-represented and emerging artists. Members receive equitable display space as determined by the installation committee with consideration for the entire gallery display. We value collaboration, growth and mutual support, in an atmosphere of professionalism, respect, and courtesy. Please carefully review the conditions of membership listed below before you apply.

CONDITIONS OF MEMBERSHIP

1. Pay a onetime, non refundable entry fee of \$50
2. Pay 3 months dues before start date, then on or before the 25th of the month before they are due
3. Attend a scheduled gallery orientation and shadow a scheduled docent shift prior to start date
4. Adhere to HQ Gallery’s policies and procedures including sales transaction procedures
5. Docent for 2 – 3 hour shifts per month, or more depending on the need for docents
6. Serve on at least one committee (time commitment varies)
7. Attend General Meetings held several times a year
8. Submit original work for each new show (typically every 2 months) that's prepared for professional gallery display
9. Agree to all terms and conditions outlined in the Artist Member Contract Agreement

MEMBERSHIP APPLICATION INSTRUCTIONS

Send this completed application, along with your resume or CV, Artist Bio or Artist Statement, and 3 digital images (jpg format) OR the link to your website to Mary Frances Kelly Poh at maryfranceskellypoh@gmail.com

Qualified applicants will be contacted to set up an interview. Bring 3 samples of your art to the interview. Be prepared to discuss your artwork, process, previous gallery or exhibition experience, (if any) why you want to join our gallery, and how you plan to contribute as a member.

NAME (Please print or type) _____ DATE Submitted: _____

ADDRESS: _____

EMAIL: _____ PHONE: _____

Medium: _____

WEBSITE: _____

Signature: _____