

Lyme Art Association Exhibition Tag
Inventory Copy (Taped to back of Artwork)

Name _____

Address _____

City, State Zip _____

Phone _____

Email _____

Title _____

Medium _____ Size _____

Price _____ Date _____

Exhibition _____

Elected _____ Assoc. _____ Individual _____

Catalog Copy (LAA keeps for Show Catalog)

Name _____

Title _____

Medium _____ Price _____

Exhibition _____

Accepted _____ Declined _____

Please number your submitted work:

___/___ (Example: #1/4 or #2/4 or #3/4)

Please print the first letter of your last name in the box.

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