

Name:

Mailing Address: \_ Home Address:

## Trail's End Art Association

Credit

Date:

## 2019 July-December Membership Application

To become a new member of TEAA, or to renew your membership for 2019, please complete this **Membership Application** and the **TEAA Liability Agreement** printed on the back, and drop it off with payment at the TEAA Gallery or mail to PO Box 2351, Gearhart, Oregon 97138.

For additional information visit our website at <a href="www.trailsendart.org">www.trailsendart.org</a>, or contact Mary Schlunegger, VP Membership, at 503-861-8076 or northcoastdesigns@yahoo.com.

Phone number to be published in TEAA directory: Other Phone:

Membership Type	Standard 5 Gallery "Sits" Required 15% Commission, \$1 per Card	Alternative No Gallery "Sits" required 30% Commission, \$1 per Card
Individual	\$35	\$75
Family	\$50	\$90
Associate (18-25 years old)	\$20	\$40
High School Student	n/a	Free (15% commission)
acceptable. Arranging for another fine of \$20 per unfulfilled sit oblications and the second	gation. T require the member to sit the galler	ry even when they have work on display
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## Trail's End Art Association 2019 Liability Agreement

I agree to assume entire responsibility for my art work and understand and acknowledge that Trail's End Art Association (hereinafter known as TEAA), its Board members, volunteer staff, and members, do not assume any responsibility of any kind for loss, theft, or physical damage to artworks of any kind under any circumstances. I display my art work entirely at my own risk. I am responsible for the transport of my artwork to and from my home or studio to the TEAA receiving site entirely at my own risk, regardless of whether TEAA Board members, TEAA volunteer staff and/or members may be engaged to help.

SALE OF MY ARTWORK: I understand that TEAA Board members, volunteer staff, and members assume no responsibility for the credit of the purchaser, and assume no responsibility to me in the event a sale is canceled by the purchaser or an error in sales has been made.

This Liability Agreement will remain in effect for the following year: **2019**.

I, the undersigned artist, declare that I have read this Liability Agreement and accept the above conditions for display of my artwork in the TEAA gallery and/or at any TEAA exhibition, and I hereby release said TEAA from liability for any loss, theft, or physical damage to my art work by any means whatsoever.

Artist Signature	Print Name	
Artist's telephone number	Date	
Signature of TEAA Representative	Print Name	