

Hibernation Creations
 Co-sponsored by Crossroads Arts Council and St. Charles County Arts Council
 February 1-26, 2021
 Lillian Yahn Gallery, 3028 Winghaven Blvd., O'Fallon, MO

Consignment Inventory Form
 Show Name - Hibernation Creations
 Show Dates - February 1-26, 2021

Delivery Date: Jan. 30th 11am - 2pm _____ (gallery initial)
 Pick up Date: Feb. 26th 11am - 2pm _____ (gallery initial)

No reception: Gallery hours for viewing or private showings: Tues.-Fri: 11-4 Sat: 11-2

Name _____ Phone _____

Address _____

Email _____

Date	Item #	Description	Retail price	Date Sold	Donation amount (25%)

The Lillian Yahn Gallery, CAC and SCCAC will take all reasonable care of artwork on display. They will not be held responsible for any loss or damage which may occur. It is suggested that you retain a copy for your records.

Signature _____ Date _____

CAC and SCCAC Waiver

Thank you for sharing your work with CAC, SCCAC, the Lillian Yahn Gallery, and the community. Upon delivery of your work, please sign this waiver.

I would like to participate in the 2021 Hibernation Creations at the Lillian Yahn Gallery. I understand the number of pieces hung depends on gallery space.

I understand that I am responsible for getting my work to the Lillian Yahn Gallery January 30, 2021 between 11 am and 2 pm and picking up my work from same by February 26, 2021. Failure to do so may result in storage or donation of my work.

If I have an emergency interruption of these plans, I will notify the Lillian Yahn Gallery immediately to make mutually agreed upon arrangements.

I agree that my name, pictures of self and my works may be used in promotion of the show by CAC and SCCAC.

I understand that the Lillian Yahn Gallery, CAC or SCCAC is not legally responsible for anything that might happen to my work during installation, display or removal of said work.

Furthermore, I agree to indemnify and hold harmless the Lillian Yahn Gallery, CAC or SCCAC from any claims that might come out of display and use of my art work. I release and forever discharge the Lillian Yahn Gallery, CAC, SCCAC and their officers, agents, representatives, employees from any and all responsibility and liability claims that might result from the display of my art work.

The Lillian Yahn Gallery, CAC and SCCAC will take reasonable precautions in handling, installation and display of my work.

My signature acknowledges my awareness and agreement to all terms stated above.

Signature _____ Date _____

Choose one:

I am a member of CAC _____ SCCAC _____

Accepted at the Gallery by:

Signature _____ Date _____