

Boskone 46 Art Show Resale Entry Form

c/o NESFA, P. O. Box 809, Framingham, MA 01701 – email: artshow@boskone.org – FAX: 617-776-3243

I have read and agree to abide by the rules enclosed with this entry form. I certify that I have the legal right to sell each item that I am entering in the Art Show. Date (M/D/Y): ___/___/___

Authorized Signature (required) _____

Seller name _____ Agent name _____
& address _____ & address _____
(required) _____ (if any) _____

Telephone _____ Telephone _____

Electronic mail _____ Electronic mail _____

My art will arrive at the show with me, or my agent. Return artwork to me, or my agent.

Check here if all communication should be via your agent.

Check here if we should **not** send confirmations and other notifications by electronic mail only.

Check here if you can **not** conveniently print your own bid sheets from a PDF on our website.

Check here if you would like to be notified about future shows *only* by electronic mail.

Item	Estimated Size (feet)	Item	Estimated Size (feet)
(1)	____' x ____'	(7)	____' x ____'
(2)	____' x ____'	(8)	____' x ____'
(3)	____' x ____'	(9)	____' x ____'
(4)	____' x ____'	(10)	____' x ____'
(5)	____' x ____'	(11)	____' x ____'
(6)	____' x ____'	(12)	____' x ____'

The base fee is one dollar (\$1) for each item.

If your piece sells, we will deduct 10% of the selling price, up to \$100, as our fee. If your piece does not sell, we will return your piece to you or your agent. There will be no other fee or charge.

Special Requests: _____

Make checks payable to: _____

(Payments will be made within one month after the end of the convention.)

Put on wait list rather than reject request? Yes No

\$_____ Total of Resale Fees Check / money order enclosed (payable to "Boskone 46")

Charge my: MasterCard VISA. Expiration date (M/Y): ___/___

Name on card: _____ Card #: _____

Signature: _____