



## Request to Exhibit

Exhibitor: \_\_\_\_\_

Artist (if other than the exhibitor): \_\_\_\_\_

Organization (if applicable): \_\_\_\_\_

Contact for Installation: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alt. Number: \_\_\_\_\_

Email: \_\_\_\_\_

Title of Exhibit : \_\_\_\_\_

Describe the Theme : \_\_\_\_\_

Number of Pieces : \_\_\_\_\_

Preferred Dates: \_\_\_\_\_ to \_\_\_\_\_

Requested Space: Friends Community Room  Hallway

Have you or the organization you are associated with exhibited at the Boyden Library before? If so, when?

\_\_\_\_\_

I have read the Boyden Library Exhibit Policy. I agree to comply with all policy guidelines stated therein. I agree that Boyden Library or the Town of Foxborough, and their respective employees will not be held liable for any loss or damage to the exhibit in the Library during set-up or break-down.

Printed Name

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

