

PPC PHOTO EXHIBIT SUBMISSION FORM

When you exhibit a picture with the Pocono Photo Club you agree to leave your photo for the ENTIRE time of the exhibit.

NO EARLY REMOVALS

Please print when filling out this form, except for your signature.

NAME: _____

ADDRESS: _____

PHONE #: _____

EMAIL: _____

I understand and agree that I will not hold the host facility responsible for any loss or damage to my photo (s) while on exhibit at their facility. I agree to leave my photos on exhibit for the duration of the exhibit as specified by the Pocono Photo Club and the facility displaying my photos.

I also acknowledge that the Pocono Photo Club, which includes its membership and officers, has no responsibility or liability for the work which I am displaying. I hold them harmless from any and all claims or causes of action, including attorney's fees and other costs arising from the exhibition of my photographs, including without limitation, any reception sponsored by the artist, the facility, or the Pocono Photo Club.

I acknowledge my photograph (s) is gallery ready and that if the wiring or framing of my photograph is not consistent with gallery quality displays, the Pocono Photo Club has the right to withhold it from this exhibit. I understand this decision will be made on the basis of safety to both the public and my property (said picture) or the actual ability to physically hang the picture on the wall. Should my picture not meet gallery standards I request the Pocono Photo Club to contact me at _____ so that I will be able to pick up my picture (s).

I declare and certify that the picture (s) which I am exhibiting is my original work and my own property.

YOUR SIGNATURE HERE SIGNIFIES YOU HAVE READ AND AGREE TO THE ABOVE STATEMENTS.

_____ **DATE:** _____

TITLE OF PHOTO

FRAMED SIZE

PRICE

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Attached is a check for \$_____ made out to the Pocono Photo Club, *if applicable.*