

APPLICATION DEADLINE FEBRUARY 23, 2024

Submit to bobbie@bloomNchalkfest.com

ARTIST INFORMATION		E mail	
	E-mail Phone		
City	State _	Zipcode	
LIST ADDITIONAL TEAM MEN	1BERS 1		_ 2
Check One:			
Professional ArtistA	mateur Artist	Student Artist (under 16	6 requires 1 adult supervisor/teacher)
School			
Supervisor/Instructor			
PLEASE SELECT ONE OF TH	E SQUARE SIZ	ZES LISTED BELOW	
Single (4½' by 8' approx.) _	Double (8'x	x8' approx.)	
LOCATION REQUESTS (i.e. no	ear a friend's sp	ace or previous vear's loc	ation.)
We will do our best to accommoda	_		· ·
Location Description	<u> </u>		
IMAGE & DESIGN INFORMA			N. I. II.e.
ATTACH a sketch or photo with Reproduction Description, Title &		BMIII to Bobble@bloom	Nchaikiest.com
Reproduction Description, Title &	Aitist		
OR			
Original Artwork Description			
			r travel assistance or a host home must b
submitted NO LATER than Jan	uary 15 th . For mo	ore information contact Bob	bie@bloomNchalkfest.com
☐ I plan to attend the Friday A	rtist Welcome Rece	ption.	
		for me. I plan to arrive	and depart
Flight assistance – funds are l	imited. ONLY PRE	-APPROVED REQUESTS WI	LL BE REIMBURSED.
Airport		Travel Dates	
The signature below represents a con			
further indicates agreement to abide	•		
-	SIGNATURE		

IMPORTANT NOTE: Tempera paint is not allowed due to artwork being created on sidewalks in front of private businesses.