ARTSHOP 2009
GALLERY INFORMATION

PLEASE COMPLETE THIS FORM AND RETURN WITH YOUR PARTICIPATION FEE OF $400 VIA MAIL TO THE DAAC by July 10, 2009
Send both to: DAAC, PO Box 1721, Las Cruces, NM 88004

Gallery Name: _____**Contact Name**_____

Physical Address: _____

Mailing Address: _____

Phone: _____ **Fax:** _____ **Email:** _____

Restaurant that will supply food: _____

Does this restaurant need to be recognized for donating food? _____

If yes, please provide contact name, address, phone & estimated value of donation on the reverse side.

Drawing Prize: One (1) Gift Certificate of $100.00 Value

Artist(s) and description of work to be featured at your gallery for the ArtsHop, be very specific:

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REMEMBER TO E-MAIL OR PROVIDE A CD WITH YOUR ARTIST'S IMAGES WITH NAMES AND TITLES FOR PRESS PURPOSES

Additional pages may be included if necessary

NOTE: This form may be e-mailed to you if that is easier for you to return, just let us know at infodaac@daarts.org