## FORSTER GALLERY EXHIBIT REGISTER

ARTIST'S SURNAME:		(capitals please)
FIRST NAME:		
PHONE NUMBER:		
○ I have read and agree to th	ne Gallery Guidelines	
I agree to photos of my ar	twork exhibited at the Gallery being used in GLAS publicity	/ material

Exhibition	Date	Fee	Title of Artwork	Price	Date Out
	In	Paid		\$	Sold/taken/rolled ove