

STATE OF THE ART ART OF THE STATE

October 8, 2017 - July 12, 2018

AUTHORIZED AGENT FORM

I authorize _____ as an agent on my behalf. He/she has the authority to pick-up my original artwork for the Cameron Art Museum's exhibition **State of the Art / Art of the State** during the designated pick-up period (**Friday July 13 from 9:00 a.m. - 5:00 p.m. and Saturday July 14 from 10:00 a.m. - 3:00 p.m.**). I understand that my authorized agent must submit this form and a photo I.D. when picking up my artwork.

Artist's Signature: _____ Date: _____

Artist's Name (Please Print): _____

All below information must be completed

Artist Name: _____

Phone(s) (if possible, please list two numbers): _____

Address: _____

City/State: _____ Zip Code: _____

E-Mail: _____

Title of Work: _____

Medium: _____ Year Completed: _____

Dimensions: _____

Authorized Agent's Name: _____

Phone(s) (if possible, please list two numbers): _____

Address: _____

City/State: _____ Zip Code: _____

E-Mail: _____