

application form

Contact Information

Name : _____

Address: _____

Phone No: _____

Email: _____

Project Information

Project Title: _____

Artist Name/s: _____

Preferred Dates* _____

Preferred Gallery Space*

FRONT SPACE

BACK SPACE

BOTH SPACES

*TCB will endeavor to meet your preferences, however this is not always possible.

Support Material Information

Support material supplied in at least one of the following formats:**

CD/ DVD images

CD Audio

DVD Video

VHS

Slides

Prints

Other, specify _____

Yes, I would like my support materials returned. I have included a stamped self-addressed envelope.**

**Support materials will only be returned if a stamped self-addressed envelope of the appropriate size is supplied.

Project Description

Please attach a description of your project - no more than 400 words.

Artist Curriculum Vitae

Please attach a one A4 page CV for each participating artist.

Application Checklist

Completed application form

Project description - 400 words.

Support material in the format indicated above

CVs for each artist

Stamped self-addressed envelope for return of materials (optional)

Send proposals to:

TCB art inc.
Level 1/12 Waratah Place
Melbourne VIC 3000
AUSTRALIA