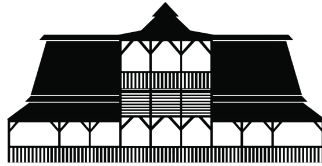




EXPRESSION OF INTEREST FORM

Personal details			
(Please complete this form in block/ Capital letters)			
Name			
Surname			
Address			
Email address			
D.O.B		Age:	
Mobile No.			
Name of parent/guardian			
Contact Number Parent/Guardian			
Artwork Information			
Title of Artwork (if applicable):			
Medium/Type of Artwork:			
Dimensions (if applicable):			
Brief Description of the Artwork (optional):			
Consent & Agreement (applicable to minors only)			
Please tick to confirm:			
<input type="checkbox"/> I confirm that I am autistic / the participant is autistic.			
<input type="checkbox"/> I agree to have my artwork displayed at the Kenwyn House Art Gallery during the exhibition period.			
<input type="checkbox"/> I give consent for images of my artwork to be used for promotional purposes (social media, website, and newspaper features).			
<input type="checkbox"/> I have read and agree to the exhibition's submission deadlines and guidelines.			
Signature of Applicant: _____ Date: _____			
Signature of Parent/Guardian (if under 18): _____ Date: _____			



KENWYN HOUSE GALLERY
SPONSORED BY GRAN KAZ

Submission Details

Please submit this completed form by 10th May 2025:

In person at Kenwyn House Art Gallery, or

By email to n.rosalie@grankaz.sc

For more information contact: n.rosalie@grankaz.sc | 2668800