BUCKHAM GALLERY

134 ½ W. Second St.

Flint, MI 48502

(810) 239-6233

www.buckhamgallery.org

EVENT/PERFORMANCE APPLICATION

Artist(s) Name/Organization: _____

Street Address: _____

City, State, Zip: _____

Phone Number: _____

E-Mail Address: _____

Proposed Event Title: _____

Proposed Date & Time: _____

Proposed Donation to Buckham Gallery: _____

This is a negotiable term. Suggested donations may include a monetary flat rate paid prior to the event, a 50% split of funds accrued during the event, or some combination of either option.

Below, include a brief description of your event, the ways you intend to utilize the gallery space, your intended audience and any additional pertinent information.

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Signature Date