BUCKHAM GALLERY

134 ½ W. Second St.

Flint, MI 48502

(810) 239-6233

www.buckhamgallery.org

EXHIBITION PROPOSAL

Artist(s) Name: _____

Street Address: _____

City, State, Zip: _____

Phone Number: _____

E-Mail Address: _____

Proposed Show Title: _____

Proposed Exhibition Period: _____

Along with the brief description you are required to provide in the space allotted below, please include the following items in your proposal packet: 6-10 digital or slide images of the work you intend to show, an updated resume and artist statement, and a SASE for material return.

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

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Signature Date