

Reading Art Association

2026 Fall Show Entry Form

Artist Information

Last Name:_____ **First Name:**_____

Street:_____ **City:**_____ **Zip**_____

Telephone:_____ **Email:**_____

Main Show Entries

Title of Main Work #1:_____

Medium:_____ **Size:**_____ **Price \$**_____

Title of Main Work #2:_____

Medium:_____ **Size:**_____ **Price \$**_____

Title of Main Work #3:_____

Medium:_____ **Size:**_____ **Price \$**_____

Mini Show Entries

Title of Mini Work:_____

Medium:_____ **Size:**_____ **Price \$**_____

Title of Mini Work:_____

Medium:_____ **Size:**_____ **Price \$**_____

Sign when you deliver of your art.

I understand that Reading Art Association, Inc., assumes no responsibility for loss, damage or theft of any works including, but not limited to, paintings, photographs or sculptures entered in this exhibit.

Signature of Entrant _____ Date_____

Sign here when you pick up your art.

I have received the above entries, unless sold, in satisfactory condition.

Signature of Entrant _____ Date_____

Attach the forms below to the backs of your entries at top center

Entries for the Main Show

Last Name _____ First Name: _____
Street: _____ City _____ Zip _____
Telephone _____ Email _____
Title of Main Work #1 _____
Medium _____ Size _____ Price \$ _____

Last Name _____ First Name: _____
Street: _____ City _____ Zip _____
Telephone _____ Email _____
Title of Main Work #2 _____
Medium _____ Size _____ Price \$ _____

Last Name _____ First Name: _____
Street: _____ City _____ Zip _____
Telephone _____ Email _____
Title of Main Work #3 _____
Medium _____ Size _____ Price \$ _____

Entries for the Mini Art Show

Last Name _____ First Name: _____
Street: _____ City _____ Zip _____
Telephone _____ Email _____
Title of Mini Work _____
Medium _____ Size _____ Price \$ _____

Last Name _____ First Name: _____
Street: _____ City _____ Zip _____
Telephone _____ Email _____
Title of Mini Work _____
Medium _____ Size _____ Price \$ _____