



Request to Exhibit at Sherwood Public Library

For consideration, review our [Exhibit Policy](#) and submit this completed form along with images of exhibit materials you want to display or that are similar to what you want to display.

Name of artist or organization: _____

Address: _____

Authorized representative, if different: _____

Phone: _____ Email: _____

Website (optional): _____

Describe the medium and subject matter of your exhibit materials: _____

Describe number and sizes of your exhibit materials: _____

Preferred dates of exhibit: _____

Proposed installation location and/or method: _____

Interested in an artist's reception? Yes If yes, preferred date & time: _____. No

Other relevant information: _____

I have read and agree to Sherwood Public Library's Exhibition Policy.

Signature: _____ Date: _____

Note: If you are a teacher or administrator representing students, please confirm below you have consent of your students to display their artwork at Sherwood Public Library.

Teacher's signature: _____

Submit completed form and supplementary materials to Sherwood Public Library, Attention Library Manager Adrienne Doman Calkins at domancalkinsa@sherwoodoregon.gov or 22560 SW Pine St, Sherwood OR 97140.