

Atkins Gallery Exhibition Insurance Form
(Please fill in all sections)



Art Festival Date: 8/4/2024 - 23/4/24

Name of Exhibition: NFoA - Art

Exhibitor contact details

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I/We the Artist(s) state that this is the condition of the artwork prior to exhibiting, to be completed with a NFoA volunteer. (Photographic documentation may need to be provided to show the artwork's condition in some instances). **Please provide a value for insurance purposes.**

Signed by the Artist(s)

Date

Class No:	Title of Entry	Insurance Value	Selling price/ NFS	Condition when submitter (to be filled in by NFoA)	Entrants signature	NFoA signature

----- to be detached by NFoA -----

RECEIPT

Name:

Class No:

Title of Work: