

KAARISILTA BIENNALE

2019

APPLICATION FORM

ARTIST'S NAME: _____

YEAR OF BIRTH: _____

STUDIO ETC. / NAME & CONTACT INFORMATION:

PHONE NUMBER: _____

ADDRESS: _____

EMAIL: _____

DETAILS OF THE ARTWORKS:

NAME OF THE ARTWORK	YEAR	TECHNIQUE	SIZE
1.			
2.			
3.			

PICTURES OF THE ARTWORKS CAN BE USED IN THE MARKETING:

YES

NO

DATE _____