



**FSVAA  
JURIED ART SHOW  
ENTRY FORM**

*Fill one column for each entry*

**Artwork Tag**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Title: \_\_\_\_\_

Category & No: \_\_\_\_\_

DO NOT FILL
-------------

Price: \_\_\_\_\_

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**FSVAA Label Tag**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Title: \_\_\_\_\_

Category: \_\_\_\_\_

DO NOT FILL
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Price: \_\_\_\_\_

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 **FSVAA Receipt / Claim Check**

Name \_\_\_\_\_

DO NOT FILL
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Artwork Title \_\_\_\_\_



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