

ARTIST REGISTRY APPLICATION



Upon receipt of the information below, artists will be included in the Las Vegas Arts Commission artist registry database. The registry serves as a resource for both the City of Las Vegas Arts Commission and the general public. Registry artists are placed on the Arts Commission's mailing list to receive calls to artists and announcements for special programs and events.

TO BE INCLUDED IN THE ARTIST REGISTRY, PLEASE SUBMIT THE FOLLOWING INFORMATION:

- **COMPLETED ARTIST REGISTRY FORM**
- **VISUALS**
 - Still Images*
 - Ten (10) digital images of recent artwork on a CD or DVD in JPEG format.
 - Still images submitted on CD's should not exceed one (1) megabyte (MB) a piece
 - Animation, film, video, electronic, kinetic, performance:*
 - One five to ten minute DVD.
 - All materials should be labeled with artist's name, address and phone number.
 - Animated images on CD should be in QuickTime, Read or Windows Media.
- **ANNOTATED LIST FOR VISUALS**
 - Include a numbered description list with artist name and telephone number, title of artwork, medium, date of artwork, size in Word or Text format.
- **RESUME**
 - Brief resume in Word or Text format; include any teaching, workshop experience (2 pages maximum)
- **ARTIST STATEMENT**
 - Brief artist statement in Word or Text format. (1 page maximum)

ALL SUMMITTED MATERIALS SHOULD BE IN DIGITAL FORMAT ON CD OR DVD.

RETURN THIS APPLICATION FORM WITH THE ABOVE INFORMATION TO:

City of Las Vegas Office of Cultural Affairs □ City of Las Vegas Arts Commission Artist Registry
401 South 4th Street □ Las Vegas, NV 89101

City of Las Vegas Arts Commission
Artist Registry Form

Name _____

Address _____ City _____ State _____ Zip _____

Email _____ Website _____

Telephone _____ Fax _____

MEDIUM|CATEGORY Please check the medium(s) and categories that are pertinent to your work.

Public Art	2- Dimensional	3- Dimensional	Design
<input type="checkbox"/> Public Art Project	<input type="checkbox"/> Mural	<input type="checkbox"/> Ceramics/ Tile	<input type="checkbox"/> Digital or Animation
<input type="checkbox"/> Design Team	<input type="checkbox"/> Painting	<input type="checkbox"/> Glass	<input type="checkbox"/> Architectural Enhancements
	<input type="checkbox"/> Photography	<input type="checkbox"/> Installation	<input type="checkbox"/> Graphic Design
	<input type="checkbox"/> Printmaking	<input type="checkbox"/> Sculpture	<input type="checkbox"/> Landscape Architecture

Other _____

EDUCATION & WORKSHOP EXPERIENCE

May we call upon you for artist in residence positions, workshops or other education-related programs?
 What ages and/or grade levels?

- Elementary
- Middle
- High School

PERMISSION

I give permission to release my address and phone number to those who view the artist registry, upon their request:

Signature _____

Date _____