

## ARTIST RESERVATION FORM

West Hollywood / Los Angeles Erotic Art Fair Weekend October 6 – 8, 2006

Art Fair Dates: Saturday & Sunday: October 7 – 8

ENTRIES MUST BE RECEIVED WITH PAYMENT BY WEDNESDAY, SEPT. 13, 2006

Booth reservations are made upon receipt of this application with payment. Space is limited. A submitted application does not guarantee acceptance. Event schedules will be mailed to those reserving booths. 15 booths are set-aside for new artists each year. Call for details!

Tom of Finland Foundation  
Attn: WHLA EAFW Artist Reservations  
1421 Laveta Terrace  
Los Angeles, CA 90026

213.250.1685  
213.481.2092 fax  
[Administration@TomOfFinlandFoundation.org](mailto:Administration@TomOfFinlandFoundation.org)  
<PDF VERSION>

Booth Description: Size: 8' x 6' (approximate), one 6' table, one chair, back wall or partition. Booth placement will be decided approaching the event, in the month of October. Booth registration includes: • Admission to the Friday evening Artists Reception for the artist and one assistant. • Admission to the Saturday evening Awards Banquet for the artist.

**Note: Entries received after September 13 will be subject to a \$25 processing fee for a total booth registration of \$200.**

Please indicate any special requirements you have, e.g., access to electricity: \_\_\_\_\_

Please indicate the average weight of any works that need to be wall mounted: \_\_\_\_\_

For additional booths, chairs or table, contact the Foundation prior to payment for availability.

Booth Registration \$175.00 = \$ \_\_\_\_\_

**Awards Banquet - Saturday 7<sup>th</sup>, 2006. Cocktails at 8:00 pm**

Artist Reservation (1) included w/ booth = \$ \_\_\_\_ Free \_\_\_\_

Member or (1) Assistant \$45.00 ea X = \$ \_\_\_\_\_

Non-Artist Plate \_\_\_\_ \$55.00 ea X = \$ \_\_\_\_\_

**Total** \$ \_\_\_\_\_

**A limited number of hardship grants to cover the booth fee in whole or in part are available. Please call Daniel Babcock at the office for information on the Marcello Lupetti Artist Fund.**

We will distribute a program that will be given to all Fair attendees with artist contact info. Please indicate the following for your listing:

1) Your real name or artist name depending on how you want to be billed: \_\_\_\_\_

2) How you want people to contact you: website, e-mail OR phone (only one): \_\_\_\_\_

3) A 3 or 4 word description of your art, e.g. Oil Paintings, Sculpture, Drawings: \_\_\_\_\_

Legal Name \_\_\_\_\_ Artist Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

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

**Payment enclosed** (indicate one):

Check # \_\_\_\_\_ Money Order \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ American Express \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp: \_\_\_\_/\_\_\_\_ Signature: \_\_\_\_\_

**PLEASE ENCLOSE TWO SAMPLES OF THE TYPE OF WORK YOU WILL BE SHOWING WITH THE APPLICATION!**

**Additional copies of this form are available on our website: [TomOfFinlandFoundation.org](http://TomOfFinlandFoundation.org)**