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Application for VAC Satellite Galleries

Name _____ Date: _____

If a group, List all Participants:

Address _____

Phone Numbers _____

Email _____

Describe Your Artwork and Exhibition

Name of Exhibition: _____

Days & times available: _____

Please return to Venice Art Center along with photographs of your work.

Your application will be reviewed and you will be called for an appointment.

Rules of exhibition are applicable to all exhibitions supported by the Venice Art Center, including satellite

exhibitions. Rules are explained on the next page.