



(Please print clearly)

Last Name _____

First Name _____

(This is how your name will appear in the book)

The Center for Fine Art Photography Portfolio ShowCase Volume 3: Book and Online Exhibition

Mail to: The Center for Fine Art Photography
400 North College Avenue
Fort Collins, CO 80524 (970) 224-1010

OR Email to: exhibitions@c4fap.org
(word document preferred)

Address: _____

City/State: _____ Zip: _____

Telephone: Home/Cell _____ Wk _____

Email: _____

Website url _____ This website address will be printed in the book

Country: _____

Title of Work

1) _____

7) _____

2) _____

8) _____

3) _____

9) _____

4) _____

10) _____

5) _____

11) _____

6) _____

12) _____

**Please note: The information you are providing will be published as stated.
Please take the time to proof your information.**

Artist's Responsibility to Send:

- All 12 selected images. Size your images to 300ppi, 8 x 10 image size, RGB or Grayscale, JPG files are preferred, flattened, compression level 10. Please include your last name in the file name.
- A picture of yourself to be printed in the book. This image needs to be a 300 ppi, 2x3, RGB or Grayscale, JPG file, flattened, compression level 10.
- A short artist statement and biography (no longer than 300 words). *The Center retains the rights to make edits.*

Due to the Center by **June 19, 2009**. All info preferred by email to Azarie@c4fap.org

Use Rights:

By submission for jurying, artists (whose submissions are chosen for the exhibition) grant The Center for Fine Art Photography the right to use their images for the purpose of printing *Portfolio ShowCase*, marketing the exhibition, marketing the Center's programs and subsequent display on the Center's website of past exhibitions. Artists grant the use of their image(s) as stated without further contact or compensation from the Center. Artist's recognition is provided with use.