

Hart for Art
Artwork Submission Form
Broken Hill City Art Gallery

In honour of the 20th anniversary of Pro Hart's passing, supporting Motor Neurone Disease research and care.



Artist Details

Full Name: _____

Preferred Name (if different): _____

Age (if under 18): _____

Phone: _____

Email: _____

Postal Address: _____

Artwork Details | Number of artworks submitted: _____

Artwork 1 Title: _____

Medium: _____

Artwork 2 Title: _____

Medium: _____

Artwork 3 Title: _____

Medium: _____

Checklist | Please tick to confirm:

- My artwork is original and created by me
- My artwork is A5 size only
- My artwork is created on minimum 280gsm card/paper or suitable mounted support
- My artwork contains no AI-generated imagery
- My artwork is ready for display
- I understand all artworks will be exhibited anonymously
- I understand all artworks will be sold for a fixed price of \$50
- I understand artist names will only be revealed after purchase
- I give permission for my artwork to be photographed and used for promotional purposes by the Broken Hill City Art Gallery

Sales & Fundraising

I understand that proceeds from Hart for Art will support:

- Motor Neurone Disease research and care
- The preservation of the Broken Hill City Art Gallery collection

Collection

Unsold artworks may be collected from the Gallery following the exhibition. Collection dates will be advised.

- I would like my unsold artwork returned- I will collect from the Gallery
- I am happy for my unsold artwork to remain with the Gallery
- If my artwork is unsold, I would like it returned using the enclosed self-addressed prepaid return envelope/packaging.

Signature

Artist Signature: _____

Date: _____

If the artist is under 18 years of age:

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Please remember to write your name, artwork title and medium
on the back of each work

Gallery Use Only

Date Received: _____

Number(s) Allocated: _____

Received By: _____