



Florida State University Museum of Fine Arts

# FACULTY ANNUAL REGISTRATION

(use as many pages as necessary-if you would like an artist statement posted, you must create it separately)

## INSURANCE AND LABEL INFORMATION

**PLEASE PRINT LEGIBLY SO THAT YOUR LABEL WILL BE CORRECT**

Artist Name (as you want it to appear on your label): \_\_\_\_\_

Email (in case we have questions): \_\_\_\_\_

### WORK 1

Title: \_\_\_\_\_

Medium: \_\_\_\_\_

Insurance Value: \$ \_\_\_\_\_

### WORK 2

Title: \_\_\_\_\_

Medium: \_\_\_\_\_

Insurance Value: \$ \_\_\_\_\_

### WORK 3

Title: \_\_\_\_\_

Medium: \_\_\_\_\_

Insurance Value: \$ \_\_\_\_\_

### WORK 4

Title: \_\_\_\_\_

Medium: \_\_\_\_\_

Insurance Value: \$ \_\_\_\_\_

### WORK 5

Title: \_\_\_\_\_

Medium: \_\_\_\_\_

Insurance Value: \$ \_\_\_\_\_

### WORK 6

Title: \_\_\_\_\_

Medium: \_\_\_\_\_

Insurance Value: \$ \_\_\_\_\_

I understand that my work will be insured for the value listed above, and that any claims for full loss must be justified by prior sales. Work will be insured from point of arrival until pick-up. **All works are in good condition unless otherwise noted here:**

**Signature/Date** \_\_\_\_\_

*Please complete this section at the close of the show when you pick up your work.*

Retrieved By: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_