



Application Form Whyte Museum Shop Art Shows & Sales

Name _____

Address _____

Phone _____ E-Mail _____

Check which type of show you are interested in:

Individual Feature Artist Show Group Art Show Themed Show _____

Artwork description, including media

Number of images submitted _____

For more information, please contact:
Lorraine Noel-Clark, Manager of Retail Operations
Whyte Museum of the Canadian Rockies
111 Bear Street, Box 160
Banff, AB T1L 1A3
Phone: 403-762-2291 ext. 312
Fax: 403-762-8919
Email: lnc@whyte.org
www.whyte.org

For Museum Use Only

Reviewed on _____

Accepted for Art Show Yes No

Show Time Frame _____