

**PLEASE CUT APART ONLY ON SOLID LINE AND ATTACH ALL THREE SECTIONS, INTACT, TO THE REAR OF THE PAINTING**

Number of Paintings  10/2022

Name \_\_\_\_\_

Title \_\_\_\_\_

Accepted  Declined

**10/2022 CATALOG - PRINT CLEARLY**

E-mail \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Price \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

C.W.S. Member  Non-Member

Please check this box if your painting has been executed with only transparent watercolor.

Accepted  Declined

Declined  
PAINTING TITLE \_\_\_\_\_

Pick-Up Unaccepted Works: Saturday, October 1, 1:00 p.m. – 4:00 p.m.  
Sunday, October 2, 1:00 p.m. – 4:00 p.m.

Pick-Up Accepted Works: Sunday, October 30, 2:00 p.m. – 4:00 p.m.  
Monday, October 31, 12:00 p.m. – 1:00 p.m.

NAME	_____
STREET	_____
TOWN, STATE, ZIP	_____

Accepted  
**C.W.S. EXHIBITION – ARTIST NOTIFICATION**

Number of Paintings  10/2022

Name \_\_\_\_\_

Title \_\_\_\_\_

Accepted  Declined

**10/2022 CATALOG - PRINT CLEARLY**

E-mail \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Price \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

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STREET	_____
TOWN, STATE, ZIP	_____

Accepted  
**C.W.S. EXHIBITION – ARTIST NOTIFICATION**