



November 19-20, 2011

Registration Form
Deadline: October 1, 2011

Mail to:
Art Visions
Shondra Thomas
784 Iris Terrace
Decatur, GA 30033

Name: _____

Company: _____

Address: _____

Email: _____

Website: _____

**All artwork must be the original handmade work of the person listed above.
Only medium(s) listed on this form and approved by Art Visions will be displayed.**

Medium(s): _____

Brief Description
of Work: _____

Size(s): _____ Price Range: _____

Returning Artist? _____ Number of years participated: _____

Please describe any display material (boxes, racks, browsing bins, etc.) you wish to use. Since there are space constraints, Art Visions will notify you as to whether or not to bring the items.

Do you have a Paideia connection? _____

Questions? Contact Shondra: 404-514-1625
art.visions@paideiaschool.org