

Stellarcon 30

Art Show Rules

The Art Show will be held in the Provincial Ballroom at the Downtown Radisson in High Point, NC. Artist check-in will be Friday, February 17, 2006, from 1:00 pm until 5:00 pm. The Art Show will be open Friday from 6:00 pm – 8:30 pm, Saturday from 11:00 am – 6:00 pm and Sunday from 10:00 am – 12:00 pm. The Art Voice Auction will be held at 12:30 pm on Sunday February 19, 2006 in location to be announced later. Artist check-out will begin at 2:00 pm on Sunday and will be completed by 5:00 pm. Any artwork remaining in the Ballroom at this time will be moved by the Art Show Staff to facilitate tear down.

The entry fees are as follows:

Half Panel **\$10.00** (2' X 4')
Full Panel **\$20.00** (4' X 4')
One Full Bay **\$70.00** (4 4' X 4')
1 Table **\$40.00** (6 Foot Space)
½ Table **\$20.00** (3 Foot Space)

The Art Show Reservation Deadline is January 27, 2006. Please make checks payable to: UNCG/Stellarcon. There is no commission charged with the Regular Art Show. The art show reservations are being handled on a first come first serve basis. There is limited table space for 3-D Art Work. In case of artist cancellation, Stellarcon will attempt to resell your space. If the space is resold, it will allow us to refund your money.

All the artwork entered shall have affixed to it a completed Art Show Bid Sheet. Please be sure to include the Title and Artist on the back of the piece independent of the Art Show Bid Sheet in case the Art Show Bid Sheet should become separated from the Artwork. Please fill out an Art Show Control Sheet showing all the artwork you plan to exhibit in the Art Show. Please also make sure your artwork is ready to hang using binder clips. The panels are pegboard and we use hooks and binder clips to hang all the artwork.

We invite you to attend Stellarcon 30. If you are unable to do so, you may instead be represented by an Agent who will hang and take down your artwork. The Artist must provide a written authorization for the person named as Agent. An attending membership for you or your Agent will cost \$30.00 before January 1st and \$35.00 after January 1st. Please use the Convention Registration Form for Artist/Agent to make your reservations. If you do not plan to attend please use the same form to send in a \$10.00 Non-Attending Membership. **Please make checks payable to UNCG/Stellarcon for the Convention Reservation but you still mail all paperwork to the Stellarcon 30 Art Show address.**

Stellarcon accepts mail-in artwork. Please be sure that any artwork mailed is shipped by February 1, 2006. This will allow us time to check the artwork, make sure nothing is damaged and make sure that all the fees and forms are present and filled in correctly. In addition to the entry fee, it is required that enough funds be sent to cover return shipping and insurance. **Please make this a separate check from the entry fee.** If insufficient funds are sent for return shipping fees, the difference will be deducted from the sales of your artwork.

All artwork must be accompanied by a completed Art Show Control Sheet. This will act as a packing list to insure all artwork is present. A signed copy of the Art Show Release and Waiver must be sent either in advance or with your artwork. Please be sure your artwork fits in the space you bought. If there is too much for your space, the staff will decide which to hang and which not to hang. Panels will only be restocked as time permits.

Your artwork will be well cared for, but Stellarcon cannot be held responsible for artwork lost or damaged in shipping. Please send artwork in secure packaging, as the same package will be used to return any unsold items. Packing that cannot be reused will be replaced at the artist's expense.

A signed copy of the Art Show Release and Waiver must be returned by all artists/agents as an indication that they have read, understand and agree to abide by the rules governing Stellarcon's display and sale of their artwork. **Artists/Agents should contact Art Show Director Dixie Cochran at Stellarartshow@aol.com or at 919-481-1113 if they have any questions.**

Any item with no bids may be purchased at the Quick Sale Price listed on the Art Show Bid Sheet. As soon as one (1) bid has been made, it can no longer be purchased at the Quick Sale Price. Any item with two (2) bids will go to the Art Voice Auction on Sunday at Noon. At the discretion of the Art Show Director, items with no bids may be selected to go to the Art Voice Auction. Bidding will start with the minimum bid price or the highest written bid, whichever applies. Items with only one (1) bid may be purchased and picked up on Sunday at any point after 10:00 am but before 2:00 pm.

No food, drink, smoking or picture taking will be allowed in the Art Show Room. Members of the convention will be asked to leave bags or packages at the front door upon entering the Art Show.

Once an item has been entered in the Art Show, it may not be withdrawn or the conditions of the sale changed without the consent of the Art Show Director. The Convention Management reserves the right to refuse any artwork for display and/or sale for inappropriateness of subject matter or for administrative reasons.

PRINT SHOP

Artist wishing to sell prints may send up to 10 copies of the artwork. Prints will be sold at a commission of \$.50 per print. If you wish to sell prints, please fill out the Stellarcon 30 Art Show Print Control Sheet and also affix an Art Show Print Shop Price Tag to each print which comes 6 to a page.

Mail all Art Show Reservations and Artwork to:

**Stellarcon 30 Art Show
c/o Dixie C. Cochran
1304 Rothes Road
Cary, NC 27511
919-481-1113**

Stellarcon 30

Art Show Release and Waiver

Artist assumes entire responsibility and hereby agrees to protect, indemnify, defend, save and hold harmless Stellarcon, The Science Fiction Fantasy Federation and the University of North Carolina at Greensboro, and their agents, and the Marriott Hotel and their employees and agents against all claims, losses and damages to persons and property, governmental charges and fines, and attorney's fees arising out of or caused by the Artists installation, removal, maintenance or part thereof, excluding any such liability caused by the sole negligence of Stellarcon or the Radisson.

The Art Show Director has final authority for determining whether artwork is plagiaristic or violates trademark laws.

In addition, Artist acknowledges that Stellarcon, The Science Fiction Fantasy Federation, the University of North Carolina at Greensboro, and the Radisson Hotel do not maintain insurance covering Artist's property or liability. It is the sole responsibility of the Artist to obtain property damage, liability, and business interruption insurance covering any and all losses by the Artist.

The Laws of the State of North Carolina shall govern validity, construction, and effect of this contract. Any controversies arising between the Artist(s) and the Purchaser pertaining to this contract shall be resolved by the courts of the State of North Carolina.

I (we) hereby accept the conditions set forth above. I (we) have read the Stellarcon 30 Art Show Rules and will abide by those rules and the rules of the Convention for the duration of Stellarcon 30.

I (we) do not include reproduction rights with the sale of my work.

This release must be signed and dated before exhibiting at the convention.

Legal Name or Artist or Agent: _____
(Please Print)

Name of Artist's Firm or Organization: _____
(Please Print)

Artist's Signature

Agent's Signature

Date

Date

Return this form to: Stellarcon 30 Art Show
c/o Dixie C. Cochran, 1304 Rothes Road, Cary, NC 27511 919-481-1113
Stellarartshow@aol.com ♦ www.stellarcon.org

Stellarcon 30 Art Show Registration Form

ARTIST'S NAME: _____ Phone #: _____
Address: _____ Email: _____
City: _____ State: _____ Zip: _____
Website Address: _____

Professional Amateur Student

Subject of Artwork: Science Fiction Fantasy Anime Horror Other _____

of Panels Required: _____ Half Panel **\$10.00** (2' X 4') \$ _____
_____ Full Panel **\$20.00** (4' X 4') \$ _____
_____ One Full Bay **\$70.00** (4 4' X 4') \$ _____
_____ 1 Table **\$20.00** (6 Foot Space) \$ _____
_____ ½ Table **\$10.00** (3 Foot Space) \$ _____
\$ _____ TOTAL

Make Checks for the Art Show Panels payable to UNCG/Stellarcon. Please make Return Postage Fees payable to Dixie C. Cochran.

Any Special Requirements: _____

Make Checks for Sold Artwork Payable to: _____

Will you be attending Stellarcon 30?

Yes No, but my Agent will attend No, I will mail in my Artwork

If attending, would you like to participate in panel discussions? Yes No

If yes, what topics would you like to discuss? _____

Is there anyone you would like to be on a panel with? _____

Is there anyone you would not like to be on a panel with? _____

AGENT'S NAME: _____ Phone #: _____
Address: _____ Email: _____
City: _____ State: _____ Zip: _____

I HAVE READ AND AGREE TO ABIDE BY THE STELLARCON 30 ART SHOW RULES.

_____ ARTIST _____ DATE

_____ AGENT _____ DATE

Return this form to: Stellarcon 30 Art Show, c/o Dixie C. Cochran, 1304 Rothes Road, Cary, NC 27511
919-481-1113 ♦ Stellarartshow@aol.com ♦ www.stellarcon.org

Stellarcon 30 Art Show Bid Sheet

*Piece ID: _____

First 3 Letters of Artist's Last Name followed by Piece # (01, 02, etc.)

Professional Amateur Student

Artist: _____

Title: _____

Medium: _____

Minimum Bid: \$ _____ Quick Sale: \$ _____

NOT FOR SALE

Bidder's Name	Badge #	Bid Amt.
---------------	---------	----------

1. _____

2. _____

2 Bids Needed to Go to Voice Auction

For Auction Use Only

Buyer's Name Badge # \$ Final Bid

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*Piece ID: _____

First 3 Letters of Artist's Last Name followed by Piece # (01, 02, etc.)

Professional Amateur Student

Artist: _____

Title: _____

Medium: _____

Minimum Bid: \$ _____ Quick Sale: \$ _____

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Artist: _____

Title: _____

Medium: _____

Minimum Bid: \$ _____ Quick Sale: \$ _____

NOT FOR SALE

Bidder's Name	Badge #	Bid Amt.
---------------	---------	----------

1. _____

2. _____

2 Bids Needed to Go to Voice Auction

For Auction Use Only

Buyer's Name Badge # \$ Final Bid

Stellarcon 30 Print Shop Control Sheet

Page ____ of ____

ARTIST: _____ AGENT/OWNER: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

Email: _____ Email: _____

Professional Amateur Student Medium: _____

Check Payable to: _____

Mail In? Y N Return Ship Via _____ Return Postage Enclosed \$ _____

PIECE ID*	IN	# ENTERED	TITLE OF PIECE	OUT	PRICE	TALLY AS SOLD	SALES \$

***Piece ID is the First Three Letters of the Artist's Last Name followed by the Piece Letter (A, B, C, D, etc)**

Total # Pieces Received: _____	Total Sales This Page: _____
Checked In By: _____ (Print Name)	Total Sales: _____
# Pieces Sold: _____	Less \$.50 per print sold: _____
# Pieces Returned: _____	Amount Due to Artist: _____
Received By: _____ (Print Name)	
Checked Out By: _____ (Print Name)	
Early Check Out OK By: _____	
Verified by Art Show Director: _____	

**STELLARCON 30
PRINT SHOP PRICE TAGS**

***PIECE ID:** _____

*First three letter of Artist's Last Name followed by
Piece Letter (A, B, C, etc)

TITLE: _____

ARTIST: _____

Professional Amateur Student

Original Medium:

PRICE: \$ _____

**STELLARCON 30
PRINT SHOP PRICE TAGS**

***PIECE ID:** _____

*First three letter of Artist's Last Name followed by
Piece Letter (A, B, C, etc)

TITLE: _____

ARTIST: _____

Professional Amateur Student

Original Medium:

PRICE: \$ _____

**STELLARCON 30
PRINT SHOP PRICE TAGS**

***PIECE ID:** _____

*First three letter of Artist's Last Name followed by
Piece Letter (A, B, C, etc)

TITLE: _____

ARTIST: _____

Professional Amateur Student

Original Medium:

PRICE: \$ _____

**STELLARCON 30
PRINT SHOP PRICE TAGS**

***PIECE ID:** _____

*First three letter of Artist's Last Name followed by
Piece Letter (A, B, C, etc)

TITLE: _____

ARTIST: _____

Professional Amateur Student

Original Medium:

PRICE: \$ _____

**STELLARCON 30
PRINT SHOP PRICE TAGS**

***PIECE ID:** _____

*First three letter of Artist's Last Name followed by
Piece Letter (A, B, C, etc)

TITLE: _____

ARTIST: _____

Professional Amateur Student

Original Medium:

PRICE: \$ _____

**STELLARCON 30
PRINT SHOP PRICE TAGS**

***PIECE ID:** _____

*First three letter of Artist's Last Name followed by
Piece Letter (A, B, C, etc)

TITLE: _____

ARTIST: _____

Professional Amateur Student

Original Medium:

PRICE: \$ _____

Stellarcon 30

February 17-19, 2006 ◀▶ Downtown Radisson, High Point, NC

Convention Registration Form for Artist/Agent

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Registration Type:

- \$30.00 - Prior to January 1, 2005
 \$35.00 - After January 1, 2005
 \$10.00 - Non Attending

Make Check for Convention Registration Payable to UNCG/Stellarcon.

You can mail it along with your Art Show Registration to:

Stellarcon 30 Art Show
c/o Dixie C. Cochran
1304 Rothes Road
Cary, NC 27511
919-481-1113
Stellarartshow@aol.com

FOR OFFICE USE ONLY

Date Received: _____

Check Money Order Cash

Check #: _____

Amount: \$ _____

Received by: _____