

SECTION 8 – ART (Paintings)

ENTRY FORMS AND PAYMENT DUE:

- **By mail:** 4:00 pm Friday 24th February 2012
Castle Hill & Hills District Agricultural Society
PO Box 6101
BAULKHAM HILLS BC 2153
- **In person:** 4:00pm Friday 24th February 2012
Show Office
Castle Hill Showground,
Doran Drive (off Carrington Road)
Castle Hill NSW 2154

LATE ENTRIES WILL NOT BE ACCEPTED

Entry Fees: \$12.00 per painting for NON-MEMBERS of Castle Hill Art Society
\$5.00 per entry for MEMBERS of Castle Hill Art Society

FULL ENTRY FEES must accompany each entry form.

RECEIPTS WILL BE ISSUED ON

DELIVERY OF EXHIBITS

DELIVERY OF EXHIBITS:

Saturday 10th March 2012 - 10.00 am and 12 Noon

TO: Harvey Lowe Pavilion, Castle Hill Showground,
Doran Dr (off Carrington Rd), Castle Hill.

NO PAINTINGS will be accepted after this time & date.

COLLECTION OF EXHIBITS:

Sunday 18th March 2012 between 5pm and 6pm

FROM: Harvey Lowe Pavilion, Castle Hill Showground,
Doran Dr (Off Carrington Rd), Castle Hill.

Enquiries:

Enquiries regarding exhibits should be directed to the Show Office.

Tel: 9634 2632 or

Fax: 9634 3973

Email: enquiries@castlehillshow.com.au

OR to the ART Section Co-ordinator,

Mrs J. Adam 0435 328 621

ART SECTION REGULATIONS

In addition to the Rules and Regulations of the Society, the following regulations apply to competitors and entries in the Art Section.

- **Section, Title, Price, Artist's Name and Address** must be printed on back of exhibits.
- Exhibits are to be correctly framed, ready to hang with cord and strong staples only.
(NO screw eyes or protrusions)
- NO wet paintings.
- NO copies, including photographs with Copyright
- NO computer enhancements.
- All work to be completed in the last 2 years and not previously exhibited at **Castle Hill Annual Show**.
- Limit of seven (7) paintings
 - **two (2) only in any section**
 - One (1) image per FRAME
- Exhibits must not exceed the following outside measurement of the frame:
 - 1 (one) only entry – 148 inches (384cm) outside perimeter frame (equals 1 full sheet)
 - 5 (five) framed entries – 125 inches (330cm)
 - or smaller. (Frame optional where indicated)
- Exhibits from Agents or Galleries Not Accepted.
- For **CHILDREN'S ART ENTRIES** see Section 17. Also **Paper and Fibre Creations** Section 16
- All paintings will be judged but not necessarily exhibited.
- All paintings must be for SALE –**Portraits optional**.
- 25% commission will be charged on all sales.
- **PAINTINGS ONLY** – NO Lithographs, Etchings, Silk Paintings or Photographs – See Section 5, 16 or 18.
- Exhibitors are reminded that it is their responsibility to arrange insurance cover for exhibits. All care is taken but NO responsibility will be accepted for loss, damage OR exhibits not collected.
- Exhibits not collected on Sunday 18 March 2012 will be left at the Show Office **by arrangement only**.
- The Society may allow exhibits on display for use in all media publicity.
- Judge's decision is final and no correspondence will be entered into.

WAIVER/INDEMNITY FORM

Each Exhibitor named on the entry form must sign the Waiver/Indemnity form

TWO PAINTINGS ONLY PER SECTION

Castle Hill & Hills District Agricultural Society Inc SECTION 8 – ART

ENTRY FORM

Entries Close (by mail & in person)

4.00 pm Friday 24 February 2012

SECTION	TITLE	PRICE	OFFICE USE
1 Framed	Traditional Oil, Acrylic – any subject		
	1.	\$	
	2.	\$	
2 Framed	Water Based Medium – traditional, any subject		
	1.	\$	
	2.	\$	
3 Framed	Pure Pastel only – any subject		
	1.	\$	
	2.	\$	
4 Frame Optional	Contemporary – refer to conditions		
	1.	\$	
	2.	\$	
5 Frame Optional	Show or Agricultural Theme – refer to conditions		
	1.	\$	
	2.	\$	
6 Framed	Drawing	\$	
	1.		
	2.	\$	
7 Framed	Small Paintings – Image Size 9"x5" or smaller – one painting per frame		
	1.	\$	
	2.	\$	
8 Frame Optional	Castle Hill Art Society Merit Award (no previous awards - members only)		
	1.	\$	
	2.	\$	

Title :	First Name:	Surname:	Phone:
Address:		Suburb:	Postcode:
email:			Castle Hill Art Society Member Yes / No
Entry Fee \$	Cheque/Money Order/Cash		Hobbyist Yes / No
(Payable to <i>Castle Hill & Hills District Ag. Soc. Inc</i>)			ABN:
I accept the special conditions of entry to Castle Hill & Hills District Agricultural Society Inc.			
Signed:			
I hereby authorise			to collect my paintings.
<p>Please complete <i>Exhibitor's copy of the entry form</i> in Section details and <i>Indemnity & Waiver form</i> All exhibitors and friends are invited to the Official Award Night Thursday 15 March 2012 at 8 pm</p>			

PARTICIPANT'S INDEMNITY & WAIVER

RISK WARNING

The Agricultural Societies Council of NSW advises that the participation, including passive participation, in events or activities at an agricultural show contain elements of risk, both obvious and inherent. The risks involved may result in property damage and/or personal injury including death.

TO BE SIGNED BY PARTICIPANT OVER 18 YEARS OF AGE:

ADULT

1. I the signatory acknowledge, agree, and understand that participation, including passive participation, in events and activities at this, or at any show contains an element of risk of injury and I agree that I undertake any such risk voluntarily of my own free will and at my own risk.
2. I the signatory acknowledge, agree and understand that the risk warning at the top of this form constitutes a 'risk warning' for the purposes of Division 5 of the Civil Liability Act 2002 (NSW).
3. I the signatory acknowledge the risk referred to above and agree to waive any and all rights that I, or any other person claiming through me, may have against the Castle Hill Show Society in relation to any loss or injury (including death) that is suffered by me as a result of the undersigned's participation in any event held by the show.
4. The signatory must continually indemnify the Castle Hill Show Society on a full indemnity basis against any claim or proceeding that is made, threatened or commenced and any liability, loss (including consequential loss and loss of profits), damages or expense (including legal costs on a full indemnity basis) that the Castle Hill Show Society incurs or suffers, as a direct or indirect result of the participant's participation in any event held by the Castle Hill Show Society.

I have read this Indemnity and Waiver form and acknowledge and agree with its contents. I have made further enquiries which I feel are necessary or desirable and fully understand the risks involved in this activity.

Name: _____ Telephone:- _____

Address: _____

Suburb:- _____ Pcode:- _____

Signature: _____ Date: _____

TO BE SIGNED BY PARENT/GUARDIAN OF SUBJECT MINOR:

CHILD

1. I, the signatory acknowledge, agree and understand that participation, including passive participation, in events and activities at this, or at any show contains an element of risk of injury.
2. I, the signatory acknowledge, agree and understand that the risk warning at the top of this form constitutes a 'risk warning' for the purposes of Division 5 of the Civil Liability Act 2002 (NSW).
3. I understand that by participating in this show, my child / ward may become exposed to the risk of injury, and I consent to the participation.
4. I, the signatory assert that the above named minor voluntarily consents to participation in this Show
5. I, the signatory acknowledge the risk referred to above and agree to waive any and all rights the above named minor, or any other person, may have against the Castle Hill Show Society in relation to any loss or injury (including death) that is suffered by the above named minor as a result of participation in this show.
6. The signatory must continually indemnify the Castle Hill Show Society on a full indemnity basis against any claim or proceeding that is made, threatened or commenced, and any liability, loss including consequential loss, and loss of profits, damage or expense (including legal costs on a full indemnity basis that Castle Hill Show Society incurs or suffers, as a direct or indirect result of the above named minor's participation in any event held by the Castle Hill Show Society.

I have read this form and acknowledge and agree with its contents. I have made further enquiries which I feel are necessary or desirable and fully understand the risks involved in this activity.

I _____

am the parent/guardian of: _____

Address: _____

Suburb: _____ Pcode:- _____

Date of Birth: _____ Signature: _____ Date: _____

Office Use:

Signed for *CH & H D A S Inc.* Name: _____ Signature: _____ Date: _____