



**Kew Gardens Improvement Association, Inc.**

*Sylvia Hack, President*

*Kew Gardens Improvement Association, Inc.*

*P.O. Box 116, Kew Gardens, NY 11415*

**The Kew Gardens Spring Art Show**  
**June 1, 2008, 11:00- 6:00 (raindate June 8)**

*to benefit the Jamaica Hospital Medical  
Center Pediatric Emergency Fund*

**ARTIST SIGN UP INFORMATION**

**LOCATION:** Kew Gardens Long Island Railroad north parking lot (82-60 Austin Street, Kew Gardens) near Lefferts Boulevard. Travel directions available upon request.

**SET UP TIME:** begins at 8:30 AM and must be finished by 10:45 AM

**SPACE:** 10' X 7'. All spaces are assigned on a first come, first serve basis. TABLES & CHAIRS ARE NOT SUPPLIED. You can unload your car by the LIRR and then it will be necessary to use neighborhood parking.

**FEE:** (due by May 10, 2008) \$40 MONEY ORDER payable to KGCRA (Kew Gardens Council for Recreation & the Arts, Inc.) which will be in part donated to Jamaica Hospital Medical Center (JHMC) Pediatric Emergency Fund. Please mail your money order to Carol Lacks, 117-01 Park Lane South, Kew Gardens, NY 11418.

**REQUIREMENTS:** All items must be made by participating artists. The Jamaica Hospital Medical Center, the MTA and its subsidiaries and affiliates, the Kew Gardens Improvement Association, Inc. and the Kew Gardens Council for Recreation and the Arts, Inc., will not be held liable for injury to persons, property or exhibited artwork during the course of the event.

**CANCELLATION POLICY:** If you must cancel your participation, your payment will be refunded provided you give notice 1 week prior to the event. However, if the cancellation policy is not adhered to, your payment will be donated to JHMS Pediatric Emergency Fund. Emergency cancellations will be fully refunded.

**CLEAN UP:** Each artist is required to keep their space clean of trash and debris. All walk areas around the table must be clear and free of tripping hazards.

Contact Carol Lacks (718) 847-2045 or CarolLacks@aol.com if you require any further info

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Type of Artwork to be exhibited on June 1(rain date June 8) \_\_\_\_\_

I understand and agree to comply with the above terms and conditions

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_