LIABILITY RELEASE FORM

It is my intention to exhibit my artwork at Dakota Gallery.

I understand that the gallery where my work will be hanging or displayed is open to the public during the business hours of Dakota Art Store (MON-SAT: 10-5) as well as during gallery events (First Friday Art Walk, etc.).

With this understanding, I release Dakota Gallery/Dakota Art Store from full liability for loss, theft, or damage to any piece of artwork or frame I submit. In the case of any of these situations, Dakota Gallery/Dakota Art Store will submit a claim with assistance from the artist to account for the cost of materials in the work affected, but cannot replace full price value of said work.

I agree to pick up my work within 30 days of the end date in which it is exhibited, unless further arrangements have been made with the gallery. **Dakota Gallery will receive a 40% commission** from the total price of any works sold during said exhibition times.

This agreement is executed and effective this date:_____202___, and terminates when said work is returned to me.

***Artist Signature:** _____ ***Artist Name (print):**_____

***Artist Address:** _____ ***Email address:**_____

_____ ***Phone number:** _____

Art Handler Signature: _____ Art Handler Name (print): _____

Exhibition dates: _____- _____ Exhibition Title: _____

***Total number of works submitted:** _____

***Title**	***Medium**	***Full Value**

POST-EXHIBITION (Pick up Day)

***All art received by:** _____ **Date:**_____

Art Handler Signature:_____

Art Handler Name (print): _____

*** = required information field from artist (this info will appear on wall tags - please be accurate. Please indicate if work is NOT for sale. We still need a dollar value, 'tho.)**