



Salt Spring Gallery Co-operative

135 McPhillips Ave.

Salt Spring Island BC

V8K 2T6 info@saltspringgallery.com

250-931-0011

Artist Application

Date: _____

Name: _____

Address: _____

Telephone: _____

E-mail: _____

Thank you for submitting your application to join The Salt Spring Gallery. Note that this form has two parts. The first asks you about your experience as an artist and about the nature of your artwork. The second part is meant to explore your experience in the business side of art and the retailing of artworks. Please include any background in business or retail sales that may be relevant. Member artists participate actively in the running of the Gallery by staffing (presently 2.5 days/month), attending meetings, sharing chores and committee work.

Part 1: Who Are You?

Please include with application:

- 5 images of your work
- Current resumé

Please describe the materials and techniques used in each piece. Number each sample image to correspond to the description on this application form.

1 _____

2 _____

3 _____

4 _____

5 _____

Background Information

How long have you been an artist? _____

Where have you studied? _____

Where do you sell your work? _____

Is there anything else you would like us to know about your work?

Work is selected by a committee of current Member artists. Your application will be kept on file until we have an opening for a space that is appropriate for your type of work. When an opening presents itself we will call you and set up a time for you to come and present your 5 original finished pieces to the committee. Work is evaluated on the basis of originality of design, craftsmanship, marketability and appropriateness for our Gallery.

Part 2: How You Can Help Run the Gallery

Your ability and willingness to contribute to the running of the Gallery is also an aspect that we will consider in assessing your suitability as a Member. Please tell us about some of your work experience.

Have you worked in a retail/customer service environment? _____

How comfortable are you currently with the art of selling?

(approaching customers, describing the work, closing the sale)

Please be honest - we offer coaching to artists who need support. _____

What other skills might you be able to offer to the Gallery?

(e.g. bookkeeping, graphics design, business management experience, fund-raising, secretarial skills, hand-man skills, gardening, or anything else you can offer) _____

Do you have any physical concerns that might affect your ability to staff the Gallery and sell to the customers? (e.g. stairs, lifting or moving items, being on your feet for periods of time, etc.) _____

Are you generally available on-island for 12 months a year, or do you regularly go away for a period of time each year? If so, for how long are you usually away and at what time of year? _____

We like to be transparent about the current level of sales and the financial situation of the Gallery, and will offer a disclosure to successful candidates who are offered a Gallery membership, prior to the signing of an Artist's Contract with us. Please ask for any information you feel you need prior to signing on with us.

Please return your application, images of your art, and your resumé by email, in person or snail mail to:

The Salt Spring Gallery
135 McPhillips Ave
Salt Spring Island BC
V8K 2T6 info@saltspringgallery.com

Prior to joining the Gallery, I will review the Rules and Policies so that I understand the requirements of being a Gallery artist as well as the commitment to active participation in the running of the gallery. I understand that there is a non-refundable \$400 initiation fee, \$100/month member dues, plus approximately 2 ½ days per month when I will be expected to staff the gallery. The gallery currently takes a 15% commission on all sales. As a member, I understand I will be expected to participate in the running of the gallery, as well as attend regular membership meetings. In the event that I should be accepted as an artist of the Gallery, I understand that my work on Salt Spring Island would be exclusive to the Gallery and I agree not to have work in any other gallery or retail establishment on the island except for temporary shows like Artcraft, exhibits or private studios. This exclusivity agreement applies only to Salt Spring Island.

I agree to present myself and my work to the jury committee and will expect a call for an appointment when an appropriate space for my type of work is available.

Artist signature _____

Days or time best for me to have my work juried: _____