



The Tenth Annual
Grace Cruice
Memorial Exhibition



ENTRY FORM

Please complete and return by 5pm on Monday 30th March to BACCI, P.O.Box 111, Ballina NSW 2478
OR drop off at Ballina Colour Copy, 2/19 Moon Street Ballina, OR email to ericard100@gmail.com

Name _____

Address _____

Phone _____

Email _____

ART please read exhibition
guidelines regarding size etc.

TITLE of ARTWORK	MEDIUM	PRICE	SIZE	

CRAFT please read exhibition guidelines regarding size etc

TYPE of CRAFT eg Hand Made Ceramic	TITLE of PIECE eg large blue bowl	PRICE	SIZE	

The work entered is my own work and I agree to abide by the terms and conditions of entry.

Signed.....Date.....