



Date: _____

Spokane Community College - Library Art Wall Display Application

Group or Individual Name: _____

Principal contact person: _____

Mailing Address:

Street _____ City _____ Zip _____

Phone: _____ E-mail: _____

Nature of art/other to be displayed:

Desired dates of display: Next available opening Specific dates of display (list below)

From: _____ To: _____

Are display dates flexible? Yes No

I have read and understand the policy on the use of exhibit spaces and agree to comply.

I agree to defend, indemnify and hold harmless Spokane Community College, its departments, employees, agents, officers and volunteers from any and all liability in any and all matters, including any meetings and special events, concerning the above named group or individual. I understand that I am responsible for install and de-install of work and also that the gallery space is monitored only periodically and work displayed there is most often unmonitored.

Signature: _____ Date: _____