SHOWCASE DETAILS

ELIGIBILITY

Artists who have experienced mental illnesses, developmental disabilities, substance use disorders or co-occurring disorders currently living in Alabama

RULES

Artwork must be original, two-dimensional and matted, or on canvas — NO FRAMED artwork, no exception

Artist's STORY is just as important as their artwork — no entry will be accepted without a story

DATES

Entry submission must be RECEIVED no later than March 18, 2016

Acceptance Notification will be mailed or emailed April 1, 2016

Exhibition dates: May 4- June 29, 2016

SALES

Artwork may be sold with the artist's permission

HOW TO ENTER

SUBMIT

1. The ENTRY FORM on the right,
2. Your STORY (preferably typed) AND
3. A PHOTO of the artwork you would like to enter;
4. As well as a self-addressed and stamped ENVELOPE — not necessary if entering via email

EMAIL

peggy.olson@mh.alabama.gov

or

MAIL

ADMH, Capitol Showcase
Office of Planning & Resource Development
RSA Union Building
P.O. Box 301410
Montgomery, AL 36130-1410

QUESTIONS

334-353-7538 or peggy.olson@mh.alabama.gov

ENTRY FORM

ARTIST

Name _____

Address _____

City, State, Zip _____

Phone _____

Email _____

STORY

On one page, in at least two paragraphs, tell us the following about yourself:

1. Obstacles you may have faced in life; i.e. describe your illness or disability.
2. Challenges you may have overcome in life; i.e. talk about recovery and becoming more independent.
3. How did you become an artist; i.e. do you have formal training or are you self-taught?
4. Why do you like the kind of art you do?

ARTWORK

Title _____

Dimensions *(HxW, to nearest inch)* _____

☐ NOT FOR SALE ☐ FOR SALE Price _____

AGREEMENT

I give permission for my name and story to be disclosed. I agree with the rules of this exhibit and understand that ADMH is not responsible for any damage incurred by displaying artwork.

Signature _____

Date _____