Artwork ID



the national arts program in pittsburgh

Submission Form

Please print clearly in - All Fields Required	
Artist Name:	Deliver entries to
Address:	Community Enrichment Center
City:State:Zip:	
Phone:E-mail:	
Department:	Marshall Mansion
Employee name (if different form artist)	6300 Fifth Avenue Pittsburgh PA, 15232
and/or relationship to employee:	
	Professional [] Teen (13-18) [] Youth (12 & Under) otography D) Sculpture E) Crafts F) Mixed Media
ENTRY # 1	ENTRY # 2
Name of Piece:	Name of Piece:
Size:	Size:
Year Work Completed:	Year Work Completed:
Medium (A,B,C,D,E,F):	Medium (A,B,C,D,E,F):
For Sale (Y/N) Price:	For Sale (Y/N) Price:
of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompany personal substitution of Exhibit. The receipt (below) must accompan	Date Received:
(Tea	ar off - Artist's Portion)
To be filled out by NAP official	
Receipt for Artwork 2024	Artwork ID
National	
National	A .: . M
Arts	Artist Name:
_	Artist Name: Data Delivered: NAP Official:

NOTE: Each artist is responsible for picking up his/her artwork from the exhibit site according to the Rules of Exhibit. This receipt must accompany person retrieving the artwork.