

2024 Plein Air Artist Registration Paint Menokin, Power of Place

If you are paying by check, please download the application, and mail it completed with your payment. Please make check payable to and mail to:

JART, Inc., PO Box 274, Montross, VA 22520

A single fee covers the entire event. **Failure to pay the application fee will result in application denial.**

Online registration opens: February 1, applications accepted on a first come, first served basis.

Online registration deadline: April 30

If, some reason, you are unable to attend, refunds will be honored for cancellations up until April 15.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Website: _____

Photograph: Upload a photo of yourself to be included on our website. _____

Artist's Statement/Bio: Upload here _____

____ We have permission to share your email with other Participating Artists. We will not share your email with anyone person or business.

____ I understand.

Each participant will receive 1099 for the total amount of all sales, less commission. A W9 will be included in your welcome package and must be completed and **turned in before any payments will be made.**

___ I understand.

___ I agree to the Accident Waiver and Release of Liability. -- ACCIDENT WAIVER AND RELEASE OF LIABILITY

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH THE 2024 PAINT MENOKIN, POWER OF PLACE PLEIN AIR FESTIVAL. This includes, by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that there are no health-related reasons or problems which preclude my participation in this activity.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity.

I hereby take action for myself as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for personal injury, property damage, or property theft, THE FOLLOWING ENTITIES OR PERSONS: The Menokin Foundation and JART Inc. and/or their officers, and the activity holders, sponsors, and volunteers;

(B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I acknowledge that Menokin Foundation and JART Inc. and their officers, or volunteers, are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I AGREE TO IT OF MY OWN FREE WILL.

_____ Yes, I understand.

Signed _____