

**SIDESTREET ARTS**  
 140 SE 28th Ave.  
 Portland OR 97214 • 503-327-8064  
 SidesteetArtsPDX@gmail.com

**ARTIST INFORMATION (for payment)**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**Artist Take-In  
 Inventory Agreement**

**Date:** \_\_\_\_\_

Print your name exactly as it will appear on gallery tags, signage, marketing material, etc. Print clearly, using upper and lower case as it will appear.



\_\_\_\_\_

**Enter title and medium exactly as they should appear on gallery tags:**

TITLE	MEDIUM	HxWxD	RETAIL \$	QUANT	SOLD	RTA

The above listed items have been accepted under the terms of the Agreement between **Sidestreet Arts LLC** and the undersigned artist.

Artist Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SSA Rep Signature \_\_\_\_\_ Date: \_\_\_\_\_

