

**Wethersfield Library
Exhibit Application Form**

Name: _____ Today's Date: _____

Address: _____

Home Phone: _____ Business Phone: _____

Date of proposed exhibit: _____
Month Year

| Title | Media | Brief Description | Estimated Value |
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Biographical Information for Press Release:

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Exhibit Release:

I, the undersigned, agree to the terms of the display policy and hereby release the Wethersfield Library from all claims I may have and agree to indemnify and hold the Library harmless from all claims that may arise by virtue of said exhibit.

Signature: _____ Date _____