

2025122th EDITION

SOCIÉTÉ DU SALON D'AUTOMNE 48, RUE DE BERRI 75008 PARIS, FRANCE

+33 1 43 59 46 07 info@salon-automne.com www.salon-automne.com



EXHIBITION FROM 29 OCTOBER TO 2 NOVEMBER 2025 AVENUE DES CHAMPS-ÉLYSÉES - PARIS 8th

THE COMPLETED REGISTRATION FILE MUST BE SENT BACK BEFORE 20TH APRIL 2025

EXHIBITOR

ARTIST'S DETA	AILS				DOCUMEN			
CIVILITY	MRS	ARE YOU A SALON MIF YES, PLEASE TICK	SOCIÉTÉ DU SALON D'AUTOMNE	TO BE ATTACHED + Artist's CV				
NAME SURNAME					 Artistic approach of the artwork High-definition visual(s) of the work Proof of age if under 30 			
ARTIST ALIAS (if different for	rom the surname and name)				+ Bank detail			
BIRTHDAY		NATIONALITY			ARE YOU AN ADAGP MEMBER? IF YES, PLEASE TICK HERE			
ADRESS			AREA CODE		COUNTRY			
			CITY					
PHONE		EMAIL						
WEBSITE			SOCIAL NETWORK	((facebook or instagram)				
WISHED CATEGORY	ARCHITECTURE ARTIST'S BOOKS COLLAGE COMICS DIGITAL ART, VIDEO	DRAWING ENGRAVING ENVIRONNEMENTAL ART, DESIGN, INSTALLATION, TEXTILE, DÉCORATIVE ART, CÉRAMICS, GLASS ART DESIGN, INSTALLATION, TEXTILE, DÉCORATIVE ART, CÉRAMICS, DESTACRATIVE PASTEL PHOTOGRA			SINGULAR ART STREET ART WATERCOLOUR			
ARTWORK(S)								
TITLE			DATE		HEIGHT CM.	*	WIDTH CM.	*
			SUPPORT		ДЕРТН СМ.	*	WEIGHT KG.	
TECHNIQUE(S)			MEDIUM				PRICE €.	
TITLE			DATE		HEIGHT CM.	*	WIDTH CM.	*
			SUPPORT		ДЕРТН СМ.	*	WEIGHT KG.	
TECHNIQUE(S)	TECHNIQUE(S)				MEDIUM			

LE SALON D'AUTOMNE

2025 122th EDITION

EXHIBITOR

REGISTER FORM

TITLE				DATE			HEIGHT CM.	*	WIDTH CM.	*
				SUPPORT			DEPTH CM.	*	WEIGHT KG.	
TECHNIQUE(S)				MEDIUM					PRICE €.	
TITLE	TITLE			DATE	DATE			*	WIDTH CM.	*
				SUPPORT			DEPTH CM.	*	WEIGHT KG.	
TECHN	IIQUE(S)			MEDIUM					PRICE €.	
TITLE	TITLE			DATE			HEIGHT CM. *		WIDTH CM.	*
				SUPPORT			ДЕРТН СМ.	*	WEIGHT KG.	
TECHN	TECHNIQUE(S) TITLE			MEDIUM					PRICE €.	
TITLE				DATE			HEIGHT CM. *		WIDTH CM.	*
			SUPPORT		DEPTH CM. *		WEIGHT KG.			
TECHN	TECHNIQUE(S)			MEDIUM				PRICE €.		
						* SPECIFY DIME	ENSIONS WITH F	RAME (DIM	MENSIONS WHEN HANGI	NG)
CHE	QUES REFERENCES	JOINED	TO THESE REGISTRAT	TION FOR		OR TRANSFER NUM.	DATE		AMOUNT €.	$\overline{}$
IF RESI	REGISTRATION FEES IF RESIDES ABROAD (BANK TRANSFER) IF MEMBER OF THE SALON IF MEMBER RESIDES ABROAD 0.€ 30.€		BANK NAPIE		CHECK	OK TRANSPER NOW.			APIOURI E.	
IF MEM	EXHIBITION FEES IF MEMBER OF THE SALON IF ENGRAVING OR ARTIST'S BOOK	510.€ 380.€ 280.€	BANK NAME		CHEQUE	OR TRANSFER NUM.	DATE		AMOUNT €.	
IF UNDER 30 WITH PRESENTING ID IF ENGRAVING OR ARTIST'S BOOK AND MEMBER OR UNDER 30	255.€ 220.€	JOIN A BANK DETAIL FOR POSSIBLE REFUND OF REGISTRATION FEES.								
	GING FEES EXHIBITION RIGHTS IF DIMENSION	NS ARE EXCEED	DED 200	+ 2	25% 250	+ 50% CM	300 CM	+ 100	%	
	LICATION OF NTACT DETAILS		I AUTHORIZE THE SALON D'AUT MY CONTACT INFORMATION IN	OMNE TO PUBLIS	БН	EMAIL	PH	ONE	ADRESS	
ART	IST'S CERTIFICATE							DATE		
I the	undersigned,							SIGNATI		=