

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

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EXHIBITOR REGISTER FORM

LE SALON D'AUTOMNE



EXHIBITION FROM 23 TO 27 OCTOBER 2024 AVENUE DES CHAMPS-ÉLYSÉES - PARIS 8th

THE COMPLETED REGISTRATION FILE MUST BE SEND BACK BEFORE **10th June 2024**

ARTIST'S DETAILS	DOCUMENTS				
		3	TO BE ATTACHED + Artist's CV		
NAME ARTIST ALIAS (if different from the surname and name)	SURNAME		 + Artistic approach of the artwork + Photo(s) of the artwork(s) + Proof of age if under 30 + Bank detail for possible refund 		
BIRTHDAY	NATIONALITY		ARE YOU AN ADAGP MEMBER? IF YES, PLEASE TICK HERE		
ADRESS		AREA CODE	COUNTRY		
		CITY			
PHONE	EMAIL				
WEBSITE					

WISHED SECTION	SINGULAR ART	WATERCOLOUR ON PAPER
ARCHITECTURE ENVIRONMENTAL ART, DESIGN, INSTALLATION, TEXTILE, DECORATIVE ART, CERAMICS, GLASS ART DIGITAL ART, VIDEO	 DRAWING, PASTEL, ILLUSTRATION, COMICS, MANGA ENGRAVING ARTIST'S BOOKS PAINTING 	 PHOTOGRAPHY SCULPTURE STREET ART, COLLAGE

ARTWORK(S)

TITLE	DATE	HEIGHT CM.	WIDTH CM.
	SUPPORT	ДЕРТН СМ.	WEIGHT KG.
TECHNIQUE(S)	MEDIUM		PRICE €.
TITLE	DATE	HEIGHT CM.	WIDTH CM.
	SUPPORT	DEPTH CM.	WEIGHT KG.
TECHNIQUE(S)	MEDIUM		PRICE €.

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3	TITLE	DATE	HEIGHT CM.	WIDTH CM.
		SUPPORT	DEPTH CM.	WEIGHT KG.
	TECHNIQUE(S)	MEDIUM	PRICE €.	
	TITLE	DATE	HEIGHT CM.	WIDTH CM.
4		SUPPORT	ДЕРТН СМ.	WEIGHT KG.
	TECHNIQUE(S)	MEDIUM		PRICE €.
	TITLE	DATE	HEIGHT CM.	WIDTH CM.
5		SUPPORT	ДЕРТН СМ.	WEIGHT KG.
l	TECHNIQUE(S)	MEDIUM		PRICE €.
6	TITLE	DATE	HEIGHT CM.	WIDTH CM.
		SUPPORT	ДЕРТН СМ.	WEIGHT KG.
	TECHNIQUE(S)	MEDIUM		PRICE €.

CHEQUES REFERENCES JOINED TO THESE REGISTRATION FORM

REGISTRATION FEES	69.€	BANK NAME	CHEQUE OR TRANSFER NUM.	DATE	AMOUNT €.
IF RESIDES ABROAD (BANK TRANSFER) IF MEMBER OF THE SALON IF MEMBER RESIDES ABROAD) 99.€ 0.€ 30.€				
EXHIBITION FEES	510.€	BANK NAME	CHEQUE OR TRANSFER NUM.	DATE	AMOUNT €.
IF ENGRAVING OR ARTIST'S BOOK IF UNDER 30 WITH PRESENTING ID	380.€ 280.€ 255.€				
IF ENGRAVING OR ARTIST'S BOOK AND MEMBER OR UNDER 30	220.€	JOIN A BANK DETAIL FOR POSSIBLE RE	FUND OF REGISTRATION F	EES	

PUBLICATION OF CONTACT DETAILS

I AUTHORIZE THE SALON D'AUTOMNE TO PUBLISH MY CONTACT INFORMATION IN THE CATALOG

ARTIST'S CERTIFICATE	
	DATE
I the undersigned,	
Declare that the information I provide in this form are accurate and truthful. I acknowledge having read the rules of the exhibition, and accept them without reservation. I undertake to make no claim to the Association of the Salon d'Automne, on the occasion of the exhibition of the current year, in case of change of place or date, deterioration, loss or theft, any damage concerning my work. I acknowledge being informed that it is my responsibility to take out insurance for the work I exhibit at the Salon d'Automne. I undertake, as well as my insurance, to waive all recourse to the Association Salon d'Automne, its employees or its contractual service providers. Subject to the agreements concluded by the Salon d'Automne with the Association for the Defence of Authors' Rights in Graphic and Plastic Arts (ADAGP), I undertake not to ask the Salon d'Automne for a reproduction right for the insertion in the catalogue or on the website, or on any media dealing with the subject of the Salon d'Automne, and I declare to waive the associated copyrights for an unlimited period and in all countries of the world. I also acknowledge that I have made the payments requested by me at the Salon d'Automne, both for the registration fees and for the hanging fees. Force Majeure Event: The Salon d'Automne will not be held responsible in the event of the on-fulfilment of its obligations, upon the occurrence of a case of force majeure, defined as any unforeseeable event, irresistible and resulting from external circumstances, making it impossible to organize the exhibition under the conditions described in this form.	SIGNATURE

EMAIL

PHONE

ADRESS