

ARTIST CONFIRMATION FORM

DATE: _____

SPONSORING ORGANIZATION: _____

NAME OF ARTIST(S)/GROUP: _____

TYPE OF ARTIST ACTIVITY:

Artists in Schools and Communities Residency

Arts in Education Project

Other: _____

DATE(S) OF ARTIST ACTIVITY:

PRELIMINARY ARRANGEMENTS FOR PAYMENT OF ARTIST(S)/GROUP:

AGREEMENT BY THE SPONSOR

The Sponsor is applying to the IAC for a grant to support this activity. If the application is funded, the Sponsor agrees to contact the Artist within two weeks of receipt of the IAC's funding notification letter to continue planning the activity.

If the application is not funded, the Sponsor will contact the Artist within two weeks of receipt of the IAC funding notification letter to determine whether or not the activity will still occur.

SPONSOR

Primary Person of Authority (must be the Principal if a school)

Name and Title: _____

Signature and Date _____

School/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Email: _____

AGREEMENT BY THE ARTIST

The Artist agrees to honor the terms of this commitment and, if funded, to participate in the activity as designed.

NAME OF Artist/Group:

Name: _____

Signature and Date _____

Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Email: _____

COPIES:

Sponsor

Artist

Grant Application