



PRESENTER FORM

The purpose of this form is to provide information about your presentation, so we can publish it on our website.

PRESENTER'S NAME(S):

BRIEF OVERVIEW:

PRESENTATION DATE:

PRESENTATION TIME:

PRESENTATION LOCATION:

OPTIONAL: Attach one of two digital photos of your artwork that is being displayed so this can be included with above info.

Email all of this to donlowe@cox.net. If you don't have email access, contact Don Lowe at 479-616-6000.