

PURCHASING APPLICATION

Name	Date of birth
_____	_____
Home Address	

Telephone	E-mail
_____	_____
Studio address	

Telephone	Dates
_____	_____
Place of study	

	Dates
_____	_____
	Dates
_____	_____
	Dates
_____	_____

Solo exhibitions

	Dates
_____	_____
	Dates
_____	_____
	Dates
_____	_____
	Dates
_____	_____

Important group exhibitions

	Dates
_____	_____
	Dates
_____	_____
	Dates
_____	_____
	Dates
_____	_____

Current and/or forthcoming exhibitions

	Dates
_____	_____
	Dates
_____	_____
	Dates
_____	_____
	Dates
_____	_____

Application continues overleaf

PURCHASING APPLICATION (continued)

Attach any statements you may wish to make about your work or any articles, reviews, etc. together with fuller biographical details.

Catalogues, videos submitted

Images of work sent for viewing (Identify each item with name and number)

No.	Title	Date	Size	Medium	Price
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Please return form with your images to:

Isabel Moseley, Assistant Registrar, Arts Council Collection, Southbank Centre, Belvedere Road, London SE1 8XX

Tel: 020 7921 0878 Fax: 020 7921 0700
 Email: acquisitions@southbankcentre.co.uk