



EVERSON MUSEUM OF ART

COLLEGE ART FAIR AND PORTFOLIO REVIEW DAY REGISTRATION FORM

Student Name: _____

Grade: _____

School: _____

District: _____

Phone: _____

Email: _____

Mailing Address: _____

I will be attending (check all that apply): **College Art Fair** _____ **Portfolio Review** _____

If you selected Portfolio Review, please describe your preferred mediums:

How did you hear about this program?

Please email completed form to Elizabeth Bryson at ebryson@everson.org.

Additional Information:

This program is free to attend and museum admission is free to participants and their families on the day of the program. Free parking is available to visitors in the Harrison Street lot. Reduced parking (\$2.50) is available in the OnCenter open lot and garage across from the Museum on Harrison Street. Ticket can be validated at the Visitor Services Desk.

OFFICE USE ONLY:

Date request rcvd: _____ **Reviewer Scheduled:** _____

Entered into Altru: _____ **Review Time:** _____

Entered into Excel: _____

Confirmation emailed to requestor: _____