RIVERDALE ART ASSOCIATION Exhibit Form

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Affix to back of artwork.

Affix to back of artwork.

Name:			Name:		
Address:			Address:		
Phone:	Email:		Phone:	Email:	
Title of Work:			Title of Work:		
_	Dimensions		_	Dimensions	
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Medium:	Dimensions	Price \$	Medium:	Dimensions	Price \$