

Town of Yucca Valley  
Public Arts Advisory Committee  
Artist Registration Form

Artist's Name \_\_\_\_\_

Studio Name \_\_\_\_\_  
(If applicable)

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

Brief description of your art: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please include the above information in the Town of Yucca Valley's registry of local artists. I hereby give my permission to use and share this information conjunction with the development, promotion and implementation of Yucca Valley's public arts program.

Artist's signature \_\_\_\_\_

Date \_\_\_\_\_