



brooklyn artists gym

**APPLICATION FOR
ARTIST-IN-RESIDENCE**

NAME _____

ADDRESS _____

PHONE _____

EMAIL _____

TYPE OF RESIDENCE

- MONTH-TO-MONTH \$242/month.
- SIX MONTH COMMITMENT \$215/month. Auto pay only with credit card.
- WEEKENDER \$175/month, 3 month commitment, payable quarterly.
- TWO-DAY-WEEK \$150/month, 3 month commitment, payable quarterly.

Indicate the two days you want: ___M ___Tu ___W ___Th ___F

- STUDENT \$220/month, 4 month minimum

PLEASE TELL US A LITTLE ABOUT YOURSELF:

Media (oil, watercolor, acrylics, etc.) _____

Usual size _____

How long have you been at this? _____

Art education? _____

Anything else? _____

How did you find out about us? _____

What interests you about BAG?

- Painting studio Critiques Community Gallery shows Art Storage
- Figure drawing Access to health insurance Flexible commitment
- Workshops Other _____

NAME, EMAIL AND PHONE NUMBER OF SOMEONE WHO CAN VOUCH FOR YOU:

Please return this with a \$35 *application fee* to the address below. This fee will automatically make you a Member of Brooklyn Artists Gym.

mailing address: 168 7th St., 3rd Floor,, Brooklyn, NY 11215
www.brooklynartistsgym.com