

# Louisville Visual Art Association

## APPLICATION TO SUBMIT A PROPOSAL TO FACILITATE AN *OPEN DOORS* PROJECT

### CONTACT INFORMATION:

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

PERMANENT ADDRESS: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_ EVENING PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

### PROJECT DESCRIPTION:

SUBJECT/MEDIA PROPOSED FOR PROJECT: \_\_\_\_\_

IDEAL GROUP SIZE: \_\_\_\_\_

EQUIPMENT/FACILITY REQUIREMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

SUGGESTED GROUP or ORGANIZATION FOR PROJECT: \_\_\_\_\_

DURATION OF PROJECT: \_\_\_\_\_

PROSPECTIVE DATES AVAILABLE: \_\_\_\_\_

AVAILABILITY (DAYS, HOURS): \_\_\_\_\_

PLEASE DESCRIBE PROPOSED OPEN DOORS PROJECT BELOW: \_\_\_\_\_

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REPLY TO: Aron Conaway, *Open Doors* Program Manager  
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