



Please return by post to:
 Arts and Community Development Officer
 Leisure and Community Services, Babergh District Council, Corks Lane
 Hadleigh, Ipswich, IP7 6SJ

Artist/Craft person information form (example: visual artist/film maker/craft person)

Name:		
Address:		
Telephone number:		
Mobile number:		
E-mail address:		
Website address:		
Art form:		
Principle Materials used:		
Artistic style:		
Commissions Undertaken (Please tick as appropriate)	Public (i.e. commissions through district Councils and Schools)	<input type="checkbox"/>
	Commercial	<input type="checkbox"/>
Do you have artist studio space?	Yes / No	
Do you have studio space to rent?	Yes/ No	
Do you retail your art/craft work locally?	Yes / No If yes, where?	
Do you teach?	Yes/No (Please circle where appropriate) (Please give further details in description of work)	
What age group do you teach?		
Do you deliver residencies/Workshops?	Yes/No (please circle where appropriate)	
If yes, where have you undertaken course/residencies/workshops? (Please tick as many boxes as appropriate)	Pre school	<input type="checkbox"/>
	Primary school	<input type="checkbox"/>
	Secondary school	<input type="checkbox"/>
	Libraries	<input type="checkbox"/>
	Hospitals	<input type="checkbox"/>
	Youth organisations	<input type="checkbox"/>
	Galleries/museums	<input type="checkbox"/>
	Theatre	<input type="checkbox"/>
	Special education	<input type="checkbox"/>
	Sports centres	<input type="checkbox"/>

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Artist information form continued

	Community groups	<input type="checkbox"/>
	Other, please state	

Location of work: (Please give details of the areas you largely practice work, tick as many boxes as appropriate)	Babergh District (south Suffolk)	<input type="checkbox"/>
	Other areas in Suffolk please list	
	Essex	<input type="checkbox"/>
	Norfolk	<input type="checkbox"/>
	Eastern region	<input type="checkbox"/>
	Nationally	<input type="checkbox"/>
	Internationally	<input type="checkbox"/>
Description of work: (Please continue on a separate sheet if necessary)		
Curriculum Vitae attached	Yes/No (please circle where appropriate)	

Data protection: Please read the following and circle as appropriate
I do / do not consent to Babergh District Council using the details outlined above to signpost members of the public to my services
I do / do not consent to Babergh District Council holding my details on a database
I do / do not consent to Babergh District Council sending me information on art practitioner opportunities in the future
Signature:
Date:

Thank you for taking the time to complete this form.

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