



# BELLARINE PENINSULA ARTS

## APPLICATION FORM 2022

This form can be used to join the Bellarine Peninsula Arts Association, and/or to register your interest in becoming a participant in the Northern Bellarine Peninsula Arts Trail 2022.

Becoming a member of the Bellarine Peninsula Arts Association entitles you to one business profile section on the website and reduced entrance fees to the annual Northern Bellarine Arts Trail; you will also be invited to the Annual General Meeting and other Association specific events.

All applications are subject to approval by the Bellarine Peninsula Arts Committee please complete relevant sections and email to [info@bellarinepeninsulaarts.com](mailto:info@bellarinepeninsulaarts.com).

### SECTION 1 (To be completed IN FULL by all applicants)

Are you applying on behalf of a group?  Yes  No

#### Basic Information:

Publicise?  
Y/N

Name:	<input type="text"/>	
Address:	<input type="text"/>	<input type="checkbox"/>
Town:	<input type="text"/>	State: <input type="text"/>
		Postcode: <input type="text"/>
Phone:	<input type="text"/>	<input type="checkbox"/>
Email:	<input type="text"/>	<input type="checkbox"/>
Primary Artform:	<input type="text"/>	<input type="checkbox"/>

#### Online Presence (where relevant):

Website:	<input type="text"/>	<input type="checkbox"/>
Facebook page:	<input type="text"/>	<input type="checkbox"/>
Instagram page:	<input type="text"/>	<input type="checkbox"/>

### SECTION 2 (Membership of the Bellarine Peninsula Arts Association)

New Member |  Returning Member    Membership Number:

#### Additional Information:

Solo Studio     Shared Studio

Opening Times:

By Appointment    How to contact for appointments:

Accessibility: Are there any constraints for wheelchair users or other relevant information that will help the public to access your studios?

Getting There: Help visitors to your studios find you easily

Free Parking     Metered Parking     Public Transport Nearby

Additional Information:

**SECTION 3** (Registration to participate in the Northern Bellarine Peninsula Arts Trail 2022)

Please note, the Arts Trail is focused on you and your art. Therefore please ensure you meet the following criteria before submitting your application, as fees paid are non-refundable and changes will incur an administrative fee.

**MEMBERS ONLY** (New & Existing)

I wish to participate (continue to Section 4) |  I do not wish to participate (continue to Section 5)

**NON-MEMBERS ONLY**

**Basic Information** (for publicity purposes)

Name of studio / solo / group:

**Venue Information**

Solo Studio     Shared Studio     Community Hall / Gallery  
 Other (please describe)

Address:

Town:  State:  Postcode:

Accessibility: Are there any constraints for wheelchair users or other relevant information that will help the public to access your venue?

Getting There: Help visitors to your venue find you easily

Free Parking     Metered Parking     Public Transport Nearby

Additional Information:

**SECTION 4** (All participants in the Northern Bellarine Peninsula Arts Trail 2022)

- I confirm I am / We are exhibiting in one location only
- I confirm My / Our chosen venue is suitable for display of artwork (ie. no cafes, wineries, or restaurants; if you are not sure if your proposed venue meets the criteria, please contact your area representative PRIOR to submitting your application.)
- I confirm Public Liability coverage for the duration of the event, and will submit a copy of the certificate with this application
- I/We confirm that the venue will be open for the full duration of the advertised Trail hours, and I/We will be on-site to meet the public during that period

I / We confirm that we wish to be included in the Northern Bellarine Peninsula Arts Trail 2022 on:

**26th & 27 November 2022, 10am - 4pm**

- Drysdale                       Wallington
- Clifton Springs
- Curlewis
- Leopold

**3rd & 4th December 2022, 10am - 4pm**

- Portarlinton
- Indented Head
- Bellarine
- St. Leonards

**SECTION 5** (To be completed in FULL by all applicants)

I / We state that the information I have submitted on my application is true and correct.

I / We agree to publicise and share via print media and Internet the information and images I contribute to the Bellarine Peninsula Arts. Bellarine Peninsula Arts has the authority to use images and reproduction of the images for additional promotional opportunities, including promotion of the Bellarine Peninsula Arts. All accepted images will be held as part of the Bellarine Peninsula Arts image database.

I / We certify that I have read this document carefully and that I understand and agree to all conditions. We will be in contact to obtain verification of your Public Liability Insurance and to get a formal signature of this agreement.

I / We confirm that I / We understand, should I / We change my / our information after submission, a \$15 administrative charge will be incurred.

Date:  Signed:

**PAYMENT**

Membership only - \$35 Annually     Annual Membership & 2022 Arts Trail Registration - \$50     2022 Arts Trail Registration Only - \$25

**Payment Methods**

Cheque: Made payable to "The Bellarine Peninsula Arts"  
Direct Deposit to "The Bellarine Peninsula Arts" - BSB: 633 000 Account: 167518273  
Please include your full name/studio name as reference.

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**As a not-for-profit association, and in order to keep membership fees as low as possible for our members, the Bellarine Peninsula Arts applies for various grants and private sponsorship. The following information will not be made public and is for office and data purposes only.**

Do you, or any creative practitioners involved with this application identify as -

Aboriginal and/or Torres Strait Islander	<input type="checkbox"/>	People who identify as women	<input type="checkbox"/>
Young People (less than 25 years)	<input type="checkbox"/>	People who identify as lesbian, gay, bisexual, trans and gender diverse, intersex and/ or queer (LGBTIQ+)	<input type="checkbox"/>
Seniors (people aged over 60 years)	<input type="checkbox"/>	People from culturally & linguistically diverse backgrounds	<input type="checkbox"/>
People living in regional communities	<input type="checkbox"/>	Not Applicable	<input type="checkbox"/>
People who identify as deaf and/or disabled	<input type="checkbox"/>		

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**FOR OFFICE USE ONLY**

Membership Number:

Start Date:  Renewal Date:

Receipt No

Authorised by:

Authorised signature:

Date received	Payment Method	Welcome pack sent	Uploaded to website