

HELLADA[®]

GALLERY

117 LINDEN AVE., LONG BEACH, CA 90802
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HELLADAGALLERY@HOTMAIL.COM
WWW.HELLADA.US

Request for the gallery space use

Artist Name _____

Artist tel. _____ Artist e-mail _____

Dates of the show FROM _____ TO _____

Gallery space _____ Select: B+C (main gallery) or D (back gallery)

Media exhibited _____

Special requests _____

Gallery space reservations may be approved after \$150.00 non-refundable deposit is paid. (Not required for Hellada Gallery members).

The gallery director based on availability of the space and applied on first come first serve basis will grant approval of the reservation. All scheduled shows are listed on the website www.hellada.us

Artist signature _____ Date _____