



ARTIST SUBMISSION ENTRY FORM

Submissions (whether by electronic or hard copy) must be completed, mailed or hand-delivered by **Monday, April 29, 2024.**

Artist Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Website
(if applicable): _____

Social media platforms
(if applicable): _____

Please indicate community group(s) you may be aligned with.

- | | |
|---|--|
| <input type="checkbox"/> Indigenous | <input type="checkbox"/> Unhoused |
| <input type="checkbox"/> Youth | <input type="checkbox"/> Food Insecure |
| <input type="checkbox"/> Newcomers | <input type="checkbox"/> 2SLGBTQ+ |
| <input type="checkbox"/> Racialized | <input type="checkbox"/> Non-binary |
| <input type="checkbox"/> People with disabilities | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Women | <input type="checkbox"/> Mental Health |
| <input type="checkbox"/> Other: _____ | |

How are you connected to the community, group or theme above?

Provide Rough Design Outline if desired

Muskoka Chair Front



Muskoka Chair Back



POSSIBLE NON-PROFIT CONNECTIONS

Do you currently work with a registered non-profit organization aligned with the community you Please check preferred charities you would like to be connected with, or indicate another charity aligned with your vision. This is just a small sampling of possibilities.

- | | |
|--|--|
| <input type="checkbox"/> YMCA Waterdown | <input type="checkbox"/> Eagles Nest of Waterdown |
| <input type="checkbox"/> Youth Unlimited YFC | <input type="checkbox"/> Wesley Urban Ministries |
| <input type="checkbox"/> Flamborough Connects | <input type="checkbox"/> Good Shepperd |
| <input type="checkbox"/> Native Women's Centre | <input type="checkbox"/> Hamilton Alliance for Tiny Shelters |
| <input type="checkbox"/> Hamilton Community Foundation | <input type="checkbox"/> Immigrants Working Centre |
| <input type="checkbox"/> Hamilton Regional Indian Centre | <input type="checkbox"/> Youth Mental Health Canada (YMHC) |
| <input type="checkbox"/> Coalition of Hamilton Indigenous Leadership | <input type="checkbox"/> The Hub |
| <input type="checkbox"/> Ontario Aboriginal Housing Services | <input type="checkbox"/> Pride Hamilton |
| <input type="checkbox"/> Sacajawea Non-Profit Housing | <input type="checkbox"/> Spectrum Hamilton |
| <input type="checkbox"/> Aboriginal Health Centre | <input type="checkbox"/> Thrive Group |
| <input type="checkbox"/> NPAAMB Indigenous Youth Employment & Training | <input type="checkbox"/> The AIDS Network Hamilton |
| <input type="checkbox"/> Waterdown Muslim Community Centre | <input type="checkbox"/> Hamilton Council on Aging |
| <input type="checkbox"/> Muslim Association of Hamilton | <input type="checkbox"/> CNIB Hamilton |
| <input type="checkbox"/> Nisa Homes | <input type="checkbox"/> Canadian Hard of Hearing Association – Hamilton |
| <input type="checkbox"/> Food With Grace Food Bank | <input type="checkbox"/> Canadian Hearing Services |
| <input type="checkbox"/> Flamborough Food Bank | <input type="checkbox"/> Community Living Hamilton |
| <input type="checkbox"/> Food 4 Kids | <input type="checkbox"/> Easter Seals |
| <input type="checkbox"/> Flamborough Women's Centre | <input type="checkbox"/> March of Dimes - Hamilton |
| | <input type="checkbox"/> Canadian National Autism Foundation |
| <input type="checkbox"/> OTHER | |

BEFORE YOU SUBMIT

Is your application complete?

Have you:

- Filled in required fields?
- Included 1 – 2 images of past artworks?
- Included a brief description explaining your vision for the chair?
(Don't forget to include your design outline if choosing to submit).

Please email your completed application (including all required attachments) to:
susan@waterdownvillage.ca, or,

Mail to:

Waterdown Village BIA

Box 954

20 Main. St. N., Unit 2

Waterdown, ON L0R 2H0

Deadline for Artists' Applications: Monday, April 29, 2024