

**ARTIST PROGRAM  
ARTIST-AT-WORK APPLICATION**



NAME (individual or group): \_\_\_\_\_

IF APPLICANT IS AN ORGANIZATION OR GROUP, PLEASE GIVE CONTACT NAME & INFORMATION:

\_\_\_\_\_

ART MEDIA: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

Description of Proposed Demonstration:

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please forward to:

Kitchener Public Library, c/o Stephanie Donkers-Schmalz,  
85 Queen Street North, Kitchener ON, N2H 2H1 or email required information to  
stephanie.schmalz@kpl.org