

ALL MEMBER COMMUNITY PROJECT AND SHOW

Beyond Boundaries: Exploring a Child's Imagination

The ISGB All Member Community Project and Show is a wonderful opportunity to exhibit your work as well as give a little something back to the Rochester community. This non-juried show is open to all ISGB members and is a wonderful way for new beadmakers to participate in their first show.

The theme for this year's show is **Beyond Boundaries: Exploring a Child's Imagination**. What an exciting excuse to unleash *your* imagination! Each artist is limited to one bead entry. Beads will be on display at the Rochester Riverside Convention Center July 29 - August 1, 2010 during the Gathering. The show will have two Attendees' Choice awards. The two artists with the highest number of votes will each be awarded a gift certificate!

In the spirit of giving, we plan to present our project to the Golisano Children's Hospital on Sunday at the close of the Gathering. Golisano has been ranked one of the nation's best in Pediatric Orthopedics in *U.S. News & World Report's* 2009 edition of America's Best Children's Hospitals!

We are asking that all beads be donated to this wonderful cause. Remember, the bead you display and donate is not for sale. Your beads will be included in the permanent ISGB **Beyond Boundaries: Exploring a Child's Imagination** exhibit for children to enjoy everyday!

Please ship your bead in a well-wrapped, sturdy box and include the form below. Please insure your package. In order to complete the display upon arrival in Rochester, all entries **MUST** be received before the Gathering.

Please send your bead and form to:

ISGB ALL MEMBER COMMUNITY PROJECT
C/O SARAH RIGGLE
85 E. GAY STREET - SUITE 707 - COLUMBUS, OH 43215

Deadline extended to July 12

FIRST NAME		LAST NAME	
BUSINESS NAME			
MAILING ADDRESS			
CITY ()	STATE	POSTAL CODE	COUNTRY
BEST PHONE NUMBER TO CONTACT YOU:		E-MAIL ADDRESS:	
DESCRIPTION OF THE BEAD _____			
RETAIL VALUE OF THE BEAD \$ _____ I PLAN TO ATTEND THE 2010 ROCHESTER GATHERING: YES <input type="checkbox"/> NO <input type="checkbox"/>			
Release: I have read and agree that the ISGB, hosting galleries, local chapters/groups, and volunteers are not responsible for damage or loss of pieces.			
SIGNED _____		DATE _____	

Please make a copy of this form to keep for your records. Send the original for processing to the address listed above.

DO NOT SEND THIS APPLICATION WITH YOUR REGISTRATION