

Name: ADC/BOP#:
Complex: Unit:
Address:
Title of Piece(s):
Comments about or story behind piece(s):
Do you want to sell prints? Yes □ No□ How many? Price per print
Do you want to sell the original? Yes \square No \square Price for original
Instructions for where to send funds collected?
Donation to ATLaS Justice Center: 10% □ 20% □ 30% □ Other%
Please confirm by signing below that you give ATLaS Justice Center permission to post pictures of your art pieces on our Freedom of Art Gallery in perpetuity, make prints according to your instructions herein, sell your artwork according to the instructions provided herein, and distribute the funds as instructed herein. By signing below, you also acknowledge that you understand that ATLaS will deduct the costs associated shipping, printing, framing, and processing each piece.

______Date______