Holiday Art Market

Silent Auction Donation Form

Donor Information

Artist Name: _____

Business Name (optional): _____

Phone: _____

Email: _____

Donated Item

Title: _____

Medium: _____

Estimated Retail Value: _____

Suggested Opening Bid (optional): _____

Description (optional)

Display Information

Special Display Instructions (If applicable)

Promotion

☐ I grant MAFAC permission to photograph and use images of this donated item for promotion of the Holiday Art Market and Silent Auction.

Donation Agreement

I certify that I am donating the artwork or handmade item listed above to the MAFAC Holiday Art Market Silent Auction. I understand that proceeds from the sale will benefit the Marshall Area Fine Arts Council.

Signature _____

Date _____

MAFAC Use Only

Received By _____

Date Received _____ Item Number _____