

**Details of Artist**

 Date:

|  |  |
| --- | --- |
|  |  **Name** |
|  | **Nationality** |
|  | **Date of Birth** |
|  | **Full Postal Address** |
|  |  **Email Id** |
|  | **Contact Number** |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr No.** | **Selected Theme** | **Name of Artwork /Installation** | **Type of work /** **( Materials Used)** | **Sizes in Inches** | **Image of the Artwork / Installation** | **Price** | **Donate this Painting****Add (**$√$**)** |
| **INR** | **USD** |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

**Note:**

* **Please enclose the Artwork Description, if any to be included in the Callifest Catalogue.**
* **Email this form to us on** **callifest2022@gmail.com**