

**ARTIST DESIGNATION FOR SUBMISSION
BY A COMMERCIAL GALLERY, ORGANIZATION OR ARTIST AGENT**

I hereby designate and authorize _____ (legal name of gallery/organization or agent) to submit one application to the Alberta Foundation for the Arts' Art Acquisition by Application Program on my behalf.

I will provide my designated agent with any and all information required for the purposes of the application. The information I provide will be up-to-date, accurate and true.

I agree that my designated agent may give consent to disclose any personal information about me that is contained in the application to individuals and organizations involved in researching the arts, to individuals and organizations involved in the promotion of the arts and for uses which are consistent to these two purposes.

_____ Date

_____ Artist/Parent or Guardian Signature

If the Artist is under the age of 18 years, a parent or guardian must complete and sign the Artist Designation.