COMMUNITY ARTS AGENCY

[ADDRESS] [CITY, STATE ZIP] [Tel Fax]

LOAN AGREEMENT Return this Agreement to: _____ Exhibition Title: Venues (CAA) and Dates: Lender: _____ Telephone: ______ Fax: ______ Name Address and Telephone (if different from above) for collection and return: Exact form of Lender's Name or Credit Line for exhibition label, catalogue, and other publications: Artist Name or Attribution: _____ Title of Work: Medium and Support: _____ Date of Work: _____ Inventory Number: _____ Signature, Other Inscriptions, and Their Location on Work: CIRCLE ONE: Width _____ Weight* _____ Height _____ **Dimensions** (without mat, frame or base) Depth _____ Height _____ Width _____ Dimensions Weight* _____ (with mat, frame or base) Depth _____

*Sculpture

INSURANCE

CAA will exercise the same care with respect to own works. CAA will arrange for the insurance of the W below, using standard fine arts commercial insurance and	ork on a nail to nail basis for the value stipulated
Insurance Value of the Work (U.S. Dollars): \$_	
The Lender agrees that in the event that the Worl limited to an amount as may be paid by the insurer plus ar further liability for claims arising out of any loss or damaginsurance, CAA must be supplied with a certificate of inst the Lender's policy or waiving subrogation against the Bo own insurance, this shall constitute a release of CAA from will accept no responsibility for any error or deficiency in for lapses in coverage.	ny deductible, hereby releasing CAA from any ge. If the Lender elects to maintain his/her own urance naming CAA as additional insureds under browers. If the Lender elects to maintain his/her in any liability in connection with the Work. CAA
PHOTOGRAPHY A	ND REPRODUCTION
for archival, insurance, educational, and publicity purpose	re, and publish images of the Work in any medium es. Yes No the work. If a photograph is not available, where
can CAA obtain one?	
SHIPPIN	NG
Date Work due at CAA:	
	(Month/Day/Year)
Community Art Agency assumes all costs of packing and Lender approximately three months before the opening of arrangements.	
SIGNATU	RES
The Lender declares that he/she has full authority to make correct, and that he/she has read and accepts the condition	
Name:	
(Lender or Authorized Agent)	
Signed:	Date:

Signed: _____ Date: _____