



Artist Application



(DEADLINES - If you would like to perform in Brooklyn on Aug 25th -
Return form by July 25th - Interested in the Harvest Fair - Return form by Aug 1st.)

Garden Name: _____ Borough: _____

Contact Name: _____

Address: _____ Email: _____

Phone: _____ Cell: _____

Are you interested in a specific garden space: __Yes __No

If YES Which One? _____

(circle all that apply)

What is your availability? weekdays weekends AM PM

Are you interested in tabling/performing at a GreenThumb annual event? __Yes __No

If YES Which One? GrowTogether (Spring) Summer Solstice (Summer) Harvest Fair (Fall)

PERFORMANCE ARTIST Describe your work in detail: _____

Any special needs? _____

CRAFT PERSON Describe your work in detail: _____

Any special needs? _____

FINE ARTIST Describe your work in detail: _____

Any special needs? _____

OTHER Describe your work in detail: _____

Any special needs? _____

Send Completed Form To:

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Phone: (212) 788-8073 ❖ FAX: (212) 788-8052 ❖ Email: glenis@greenthumbnyc.org