 **PCANZ Small Print 2024**

**Colophon**

| Artist name:  | * Yes I am a member for 2024/2025
* I am joining/renewing as a member
 |
| --- | --- |
| Postal Address for return of prints:  |
| Email:  |
| Phone(s):  |
| Artist’s bank account : (for prompt payments when your prints sell)(if you have been paid in the past we will have your number already) |

|  **Print Details:** **If all 4 prints are the same**  | **PAPER SIZE MUST BE A4 (210MM X 297MM)** Paper that is not this size cannot be included.  |
| --- | --- |
| **1. Title/Edition** |
| **Medium** **and/or technique(s):**  |
| **Paper:** Must be Archival quality, 220gsm or greater.  |
| **Fee paid: $40.00**  | * **Yes**
 | Date paid online:  |

 Send prints and colophon to:

| Rosalie Thompson 107 St Andrews Road Havelock North 4130 Email: jack.roset@xtra.co.nz Ph: 06 8779467 Mobile: 027 747 2952 | ORJulz Henderson404 Southampton St East Akina Hastings 4122 Email: veresmithpress@gmail.com Mobile: 022 307 9212  |
| --- | --- |

*If your prints are all different please fill out more sections, see over:*

| **Print Details:**  | **PAPER SIZE MUST BE A4 (210MM X 297MM)** Paper that is not this size cannot be included.  |
| --- | --- |
| **2. Title/Edition**  |
| Medium and/or technique(s):  |
| Paper: Must be Archival quality, 220gsm or greater.  |
| **3. Title/Edition**  |
| Medium and/or technique(s):  |
| Paper: Must be Archival quality, 220gsm or greater.  |
| **4. Title/Edition**  |
| Medium and/or technique(s):  |
| Paper: Must be Archival quality, 220gsm or greater.  |
| **5. Title/Edition**  |
| Medium and/or technique(s):  |
| Paper: Must be Archival quality, 220gsm or greater.  |
| **6. Title/Edition**  |
| Medium and/or technique(s):  |
| Paper: Must be Archival quality, 220gsm or greater.  |

**SMALL PRINT 2024 CHECKLIST:**

Each print must have the **artist’s name, title and medium written in pencil on the back**.

Also please sign your prints **on the front.**

Pay fee online to **PCANZ bank account 03 0791 0387378 00 -- $40 each printmaker.**

Include your **Full** **Name** and **SP2024** in the reference fields.

Payment queries to treasurer@printcouncil.nz

**Enclose your completed colophon with your prints.**

**PCANZ takes no responsibility for lost or damaged work.** Deadline: your prints with colophon & fee must be received by Julz or Rosalie by **Monday** **22nd April 2024**