**INDIANAPOLIS INTERNATIONAL AIRPORT PROPOSAL COVER SHEET**

Please type or print. Editable copies of this form are available upon request.

For the purposes of this document, “contact” refers to the primary individual producing and responsible for the installation during the planning, on-view and removal periods.

CONTACT NAME / DISPLAY AUTHOR: ARTIST NAME (if different):

CONTACT INFORMATION:

Mailing Address:

Phone: FAX: Email:

Artist Website URL:

DESIRED EXHIBITION PERIOD:

Number of weeks:

(note: the minimum display period is six weeks; a typical display period is 12 weeks)

Preferred installation date: Preferred removal date:

Is this period tied to a specific time-delimited event? (circle one) Yes No

If yes, please briefly explain:

DESIRED DISPLAY LOCATION(S): (mark all that apply)

 Ticket Hall display case(s) north

 Ticket Hall display case(s) south

 Concourse B connector built-in display case Glass shelves required? Yes No

 Other (please identify)

REQUESTED LOAN FEE (US dollars): (requested fee may not exceed $750; the typical fee is $500)

By submitting this display proposal, I/we agree to adhere to all the policies, procedures, rules and regulations that have been, or will be, disclosed to me/us by representatives of the Arts Council of Indianapolis and/or the Indianapolis Airport Authority (“IAA”). I/we understand that if I/we am/are selected to realize this proposal, all displays are installed at my/our own risk and expense, and I/we agree to release, indemnify and hold harmless the Arts Council, the IAA, and their directors, employees and representatives for any and all claims and damage to the displayed items and for any injuries to IAA personnel or the public or property during the installation period(s), removal period(s), while on display, and during maintenance visits. I/we also agree to indemnify the Arts Council and the IAA for any damage or injuries to third parties caused by the display; such indemnification shall not be limited by any insurance policies I/we may hold. Any damages that I or my representatives may cause to IAA premises or property shall be my/our responsibility to repair or replace at my/our sole expense.

Signature: Date:

Printed Name:

ARTS COUNCIL USE ONLY: Date received

Date reviewed

Disposition (Recommend, Deny, Hold)