

## Mid Atlantic Arts Foundation On-Line Community Artist Directory

Please include me in the community artist directory:  Yes

**Name:**

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**Address:**

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**City:**

**State:**

**Zip:**

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**Telephone:**

**Cell:**

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**Fax:**

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**Email:**

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**Web Address:**

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**Type(s) of art practiced:**

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**Length of Residency:** *(How long would you be available to work outside of your home community?)*

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**Area Available:** *(Define the area in which you are available for residency. ie. nationwide, mid-Atlantic region only, statewide, etc. Please be specific if only willing to work in certain states.)*

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**Please give examples of three community arts projects/residencies you have participated in over the last 5 years.**

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**Requirements:** (*special requirements*)

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**Comments?**

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**Please return this form to: Online Database, Mid Atlantic Arts Foundation, 201 North Charles Street, Suite 401, Baltimore, MD 21201. Or via fax at 410.837.5517 or email to [info@midatlanticarts.org](mailto:info@midatlanticarts.org)**