



OTAKON®

Walter E. Washington Convention Center
801 Mt Vernon Pl NW
Washington, DC 20001
www.otakon.com
July 26th-28th 2019

Art Show Artist Agent Authorization Form

Staff Use Only

MUST HAVE:

Staff Name: _____

Date: _____

NOTES

- ☐ Artist Registration Form
- ☐ Artist Artwork Online Picture Submission Process Complete
- ☐ Copy of Agent ID*
- ☐ Copy of Artist ID*
- ☐ Copy of Artist's W9
- ☐ Application Payment \$25 per lot (8 pieces)

*Unless they are a Parent or Guardian registering on behalf of an artist under the age of 18

I (Artist) _____ hereby give permission to _____ (Agent) to submit my artist registration form, my physical artwork, and my completed W9 form. I, the artist, have sent and completed the Artwork online Picture Submission Process. I have submitted a copy of my government issued ID along with that of my agent. I understand if my agent wishes to enter Art Show as an artist they must register separately. I understand if my agent attempts to register their artwork under my registration both myself and my agent will be disqualified from participating in Art Show. I, the artist, and my agent acknowledge and will abide by all Requirements and Guidelines of Art Show.

Artist Signature: _____ Date: _____

Agent Signature: _____ Date: _____

PLEASE PRINT CLEARLY*
FILL OUT COMPLETELY

Artist Name: _____

Artist Email: _____

Artist Phone #: _____

Agent Name : _____

Agent Email: _____

Agent Phone # (Where you can be reached at the convention): _____

* If the staffer handling your paperwork cannot read your handwriting, you will be asked to fill out a new form

