## **DEPARTMENT OF COMMUNITY DEVELOPMENT · PUBLIC ART ADVISORY COMMITTEE**CITY OF WAUKESHA · 201 DELAFIELD STREET · WAUKESHA, WI 53188 · (262) 524-3749

## APPLICATION FOR GALLERY SPACE AT WAUKESHA CITY HALL

Name of Group		
or Artist Pewaukee Area Arts Council	Date:	September 28, 2025
Street Address: N34W23871 Grace Avenue, B	Contact Person:	Irene Taylor
City, State, Zip: Pewaukee, Wisconsin 53072	Contact Phone #:	414-238-7088
Email: hofflady@yahoo.com	Alternate Phone #	
PROPOSED DATES: (Minimum reservation is one month.)		
First Choice: Fri May 1, 2026 to Tues June 30, 2026 Choice: Mo	n Mar 2, 20	26 <sub>o</sub> Thurs April 30, 2026
APPLICATION DETAILS		
Each application must include:		$\sim$
<ul> <li>Completed application form</li> </ul>		
<ul> <li>Summary of Artwork and/or Artist Bio</li> </ul>		
Detailed listing of items to be displayed, including		CITY OF
1. Total number of pieces		MAUKE2HA
2. Type of Media	,	PIIBLICART
3. Name of Artist (if more than one artist represented.)		
4. Value of Work		
<ul> <li>Digital file image samples of previous or current work.</li> <li>Incomplete or inaccurately assembled applications may not be considered.</li> </ul>		
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DEADLINES		
Applications are reviewed on a regular basis. Please email your application to <a href="mailto:rgrams@waukesha-wi.gov">rgrams@waukesha-wi.gov</a>		
at least 1 month in advance of proposed date(s).		
APPLICATION EVALUATION		
Applications are evaluated by a committee of artists, community members, and city staff. In some		
instances, artists are invited to participate without submitting an application. Applicants will be notified		
via email as soon as possible after the review on the status of their application.		
<ul> <li>Note: Please do not include prices on the artwork. Artists can provide business cards for people</li> </ul>		
to grab		
I have received and read the Waukesha City Hall Guidelines for Rotating Public Art Displays. I understand that, if accepted, I agree to have my/our group's artwork ready for display and will abide by all terms outlined in the agreement.		
Applicant Signature: Irene Taylor	⊢ Date	e: September 28, 2025
OFFICE USE ONLY		
pproval Signature: Date of approval:		
Set-up(date/time): Remove(date/time): Comments:	Applicant no	tified(date):