



**Charles W. Stockey Centre for the Performing Arts
Art Exhibit Inquiry Form**

Name: _____

Business Name, if applicable: _____

Email: _____

Phone Number: _____

Website: _____

Description of your work: _____

Number of pieces interested in exhibiting: _____

Please attach samples of your work for consideration.

For more information, please contact:

Nicole Mullen

Manager

Charles W. Stockey Centre for the Performing Arts
& Bobby Orr Hall of Fame

www.stockeycentre.com

705-746-4466 ext 402

nmullen@stockeycentre.com