The Alberta Foundation for the Arts Travelling Exhibition Program

EXHIBITION ATTENDANCE REPORT

EXHIBITION: PERIOD:

VENUE/ LOCATION

PUBLICITY: *Please attach examples or copies if possible; newspaper articles, newsletters, radio or television associated with the promotion of this exhibition in your community.*

ATTENDANCE: NOTE for non-school venues: If exhibitions are displayed in a room separate from the main area (designated display space), please use 50% of the visitor count during the time the exhibition was installed to determine the attendance.

Adults: Students/children: Total:

SPECIAL GROUPS IN ATTENDANCE:

VOLUNTEERS: Please note total number of volunteers and volunteer hours (this is the time each venue puts into the program including installation and take down of each exhibition received).

Number of Volunteers: Volunteer Hours:

EVALUATION Comments: Please comment about the success of the exhibition, audience response, concerns or the Exhibition Program in general. Please note any special programs or events that related to the Exhibition.

Signature of Venue Representative_____Date_____

At the conclusion of the exhibition please email completed form to: Xanthe Isbister
xanisb@medicinehat.ca

Alberta Foundation for the Arts ESPLANADE ARTS & HERITAGE CENTRE TREX Medicine Hat The Gas City