

Make a copy of your files.

Complete this form and submit it with the following materials to:

CHI Health Good Samaritan Foundation
Attention: Stephanie Peterson
115 West 32nd Street
Kearney, NE 68847

Questions?

Call or email: Stephanie Peterson at 308.865.2700 or stephaniepeterson@catholichealth.net

Please type or print legibly:

NAME: _____

ADDRESS: _____

CITY, ZIP: _____

DAYTIME PHONE: () _____

EMAIL ADDRESS: _____

REQUIRED MATERIALS (Please check off items as you prepare to mail your application):

- Resume or narrative biographical information.**
 - DO NOT send press clippings, brochures or other supplemental material.
- 5 – 10 selections.**
 - Will accept quality photographs or digital submissions.
- Checklist of submitted works.**
 - Each entry numbered to correspond with each image that lists title, medium, and size of each work (include work size and framed size if possible).
- Price or Value list for each piece.**
- Stamped, self-addressed envelope for return of materials.**
 - Make sure envelope is large enough to contain slides and other materials, and that postage for return is sufficient).
- All items clearly labeled with your name.**
- DO NOT use binders, covers, or any other assembly that has to be pulled apart.

ELIGIBILITY REQUIREMENTS:

- The artist must be a Nebraska resident 21 years of age or older.
- The artwork must be two-dimensional (painting, drawings, prints or photos). **Three dimensional sculpture, ceramics or glass cannot be accommodated.**
- The subject matter of the work must be suitable for display in the hospital (see attached criteria guidelines).
- The artist must assume all costs for matting, framing and transporting his or her work in the hospital.
- Applications will be accepted from individuals only. Members of artist organizations should submit separately, not as a group.
- Framing should be appropriate to size and scale of piece. **(If matted under glass, must be shatterproof or Plexiglas.) Frameless canvas is also approved.**

**FACILITY USE PERMIT for EXHIBITIONS OF ART
CHI Health Good Samaritan**

I, _____, of _____,
(Artist/Exhibitor) (Address)

Nebraska _____, hereby request the use of Good Samaritan display area for the
(Zip)
display of my art for a 4 month period. *Dates will be coordinated by the Art Steering Committee.*

I have read, understand and agree to the terms and conditions outlined below:

1. The exhibition of my work shall be limited to the gallery area designated by the CHI Health Good Samaritan Art Steering Committee.
2. The exhibition shall be limited to works **approved** by the CHI Health Good Samaritan Art Steering Committee. No substitutions allowed unless approved by the Committee.
3. The facility shall not be used for any unlawful activity.
4. Scheduling the installation will be coordinated through Stephanie Peterson:
308.865.2700 or stephaniepeterson@catholicealth.net.
5. Good Samaritan's maintenance department will guide the installation process with the artist.
6. Good Samaritan has a security clip installation system that allows a quick set-up and removal process.
7. All personnel involved in the set-up and takedown of the exhibition will conduct themselves in a manner conducive to a positive business environment.
8. Set-up and takedown of the exhibition is to be done in a timely manner, as outlined by the exhibition schedule. We ask that the shows are taken down in the last week of the session to allow time for the set-up and installation of the next show that week as well.
9. I understand that the hospital and their agents and employees assume no responsibility for loss of, or damage to the works installed, or for the injury to persons or property caused by or related to the installation.
10. I understand that no prices are to be posted directly on any works, or on the exhibition checklist. Price / Value of the pieces are submitted separately.

(Artist)

(Date)

APPROVED:

(CHI Health Good Samaritan Art Steering Committee)

(Date)

GSH is not asking for any commission off of the sale of your works; however, the artist is encouraged to donate a piece of artwork to support the Art Program. This may be done through the CHI Health Good Samaritan Foundation and is tax-deductible to the extent allowed by law.

INSTRUCTIONS FOR INSTALLING YOUR EXHIBITION

Before your exhibition date –

This checklist is designed to be used by those whose collections are selected for an exhibition in the Walkway Gallery. Please review the other materials in this packet first.

3-4 months prior to your show date

- The size of your works will determine how many selections you can hang in the gallery space. An average show will comfortably show 24-36 pieces. Visit the Walkway Gallery before your exhibition. Please make sure your pieces have hardware already attached that is compatible with our clip installation system.
- Call Stephanie Peterson @ 308.865.2700 or e-mail stephaniepeterson@catholichealth.net to coordinate the scheduled installation date and time.

2 months prior to your show date

- Please email your artist statement/bio, and the full list of your works with their prices to stephaniepeterson@catholichealth.net. Our staff will draft your bio, list of works/prices into your artist's brochure and prepare signage for your show. At this time, the committee will do final review and approval on all pieces.

Reminder: Prices and labels are not to be on the work of art – we will provide labels for your work and the prices will be listed in your brochure.

Installation Date

- On the date of scheduled installation, Stephanie Peterson, or another hospital representative, and a maintenance engineer will meet you and will be prepared to assist with the installation process.

**CHI HEALTH GOOD SAMARITAN
ART STEERING COMMITTEE
CRITERIA FOR ART SELECTION**

Based on documented research, ideal criteria have been established for selecting art appropriate for a hospital setting. Appropriate art has been proven to:

- Decrease patient anxiety
- Increase patient satisfaction
- Successfully distract the patient to mitigate pain
- Due to decreased sense of pain, decrease in pain medications being administered.
- Decrease blood pressure.

Equally important to note, inappropriate art selections have been documented to:

- Increase stress
- Increase sense of pain
- Decrease patient satisfaction
- Increase patient complaints
- Increase staff documentation of negative comments about patient.

Based on theories of why art selection is necessary, the Committee will be selecting art based on the following known and documented qualities:

- We have a predisposition to respond positive to nature settings that are good for us; therefore, nature art – especially rural scenes are good selections
- Figurative art.
- We are predisposed to respond positively to images of smiling faces, even very young children respond to facial expression. People with clearly positive facial expressions that appear relaxed or at ease.
- Positive subject matter that is unambiguous ~ art that resists interpretation is a good choice.
- Pictures of compassionate gestures of people.
- Waterscapes and rural waterscapes.
- Content that has depth; sense of safety and security is projected.
- Landscapes with positive views (i.e. barns) and green vegetation.
- People like leisure in nature scenes (i.e. sitting by the lake).
- Photography – use the same guidelines as mentioned above. Black and white photography can even have good results if the content is positive in nature.
- Flowers or gardens.