



March 29 - April 26 , 2026

Windham Hospital Gallery

The Windham Regional Arts Council was established in 1983 and is a non-profit organization. This Members Art Exhibit is a non-juried show and is open to all members. New members are welcome.

DROP OFF: Sunday, March 29th, 1:00 - 3pm

PICK UP: Sunday, April 26th, 1:00 - 2pm

ELIGIBILITY: Open to all member artists. Membership renewals of \$15.00 can be paid at drop off. **Please see mailing label for membership renewal date.**

New members are welcome. Please fill out a membership form (available online windhamrac.org).

Maximum of **THREE** pieces per artist. They must be framed, or gallery wrapped, and **WIRED**, ready to hang.

Art without wire must be rejected because of the hospital's hanging system. Sorry, no exceptions.

Direct any questions to Trish Fabish via text or call 860-617-5326

Please fill out and **TAPE** both section A&B to the lower right (looking at painting) of each piece submitted. **Label should hang below artwork. No work will be accepted without the following reference information. Please print clearly.**

The Windham Regional Arts Council, the show committee, or the Hospital are not responsible for theft or damage, or for works left after the show closes. **Submitting your art to the exhibition shall imply an agreement on the part of the artist with the above conditions.**

The hospital receives 20% of the price of the works that are purchased. This donation benefits the Windham Hospital Foundation. Checks from the hospital will be sent to the artist.

----- Cut here -----

Artist's signature: _____



Reference card 2025 (Please Print Clearly)

Name _____

Address _____

Town _____ Zip _____

Phone _____

Email _____

Title of Entry	Price
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____

1). A Entry Form 1

Name _____

Phone _____

Title _____

Medium _____ Price _____

1). B Entry Form 2

Name _____

Phone _____

Title _____

Medium _____ Price _____

2). A Entry Form 1

Name _____

Phone _____

Title _____

Medium _____ Price _____

2). B Entry Form 2

Name _____

Phone _____

Title _____

Medium _____ Price _____

3). A Entry Form 1

Name _____

Phone _____

Title _____

Medium _____ Price _____

3). B Entry Form 2

Name _____

Phone _____

Title _____

Medium _____ Price _____

Promoting the Arts in Windham and surrounding towns.



Contact us @ windhamwrac.org

03/2026 *ftw*

P.O. Box 847
Willimantic, CT 06226-0847



Call for Artists



March 29th thru
April 26, 2026

Windham Hospital Gallery
Willimantic, CT