

**RETURN ASAP, BUT BEFORE JAN 13 TO:**

via email - [Thebisme@aol.com](mailto:Thebisme@aol.com)

mail - Barbara Kirk

300 Walnut Street, #153

Des Moines, IA 50309

Fax - 515.286.4942

**PLEASE PRINT**

Name \_\_\_\_\_

DBA (co. or gallery name) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Mode of travel - will you have a car, Van, trailer... \_\_\_\_\_

If traveling with a trailer or large cab-like vehicle, please describe here (incl. dimensions) \_\_\_\_\_

If flying do you have transportation in Des Moines? \_\_\_\_\_

Who will be traveling with you?

\_\_\_ spouse/partner ( \_\_\_ need separate room \_\_\_ separate bed)

\_\_\_ business associate ( \_\_\_ need separate room \_\_\_ separate bed)

\_\_\_ children ( \_\_\_ how many) (ages \_\_\_\_\_)

\_\_\_ Pet (description \_\_\_\_\_)

First time to DSM? or how many times \_\_\_\_\_

Hobbies other than art \_\_\_\_\_

Allergies? (please explain) \_\_\_\_\_

\_\_\_ Smoking \_\_\_ non smoking

Any special needs? \_\_\_\_\_

Will you be willing to stay as far as 15 miles ( a 20 min. drive) from the Festival?

Arrival date \_\_\_\_\_ Arrival time \_\_\_\_\_

Departure date \_\_\_\_\_ Departure time \_\_\_\_\_

What hours will you be at the Festival? \_\_\_\_\_

Comments that will assist us in placing you-

\_\_\_\_\_

\_\_\_\_\_

-----