

NH Artist Roster & Directory: Disclosure Form

(for applicants & members)
(This form may be copied as necessary.)



Important Notes:

- If you are listed on the *Roster or Directory* as part of an unincorporated group, each individual in the group must complete this form. If you are an individual who performs in more than one group, you may fill out only one form, but indicate the names of all the groups with which you are affiliated.
- If applying or listed as a nonprofit organization, the authorizing official may complete this form for the whole organization as one legal entity.
- Please return this completed form to the State Arts Council when applying or annually if already a Roster or Directory member.

Name of Artist:

Name of Group (s):

Home Address:

Daytime Phone:

E-mail:

1. If you leave the box below blank, you are certifying that you have no current record of convictions.
2. If you have ever been convicted of a crime (felony or misdemeanor) that has not been annulled by a court, you must provide the following information. State the date, location, and nature of the felony or misdemeanor in the box below:

Please note: Conviction is not an automatic disqualification for Roster membership; each case will be considered individually. Your signature below certifies that the information you are providing is accurate.

WILLFUL OMISSION OR MISREPRESENTATION OF REQUIRED INFORMATION
WILL BE A BASIS FOR REMOVAL FROM THE *NH ARTIST ROSTER & ARTS IN
HEALTH CARE DIRECTORY*.

Artist Roster Member Signature:

_____ Date: _____

Artist Roster Disclosure Form (annual updates required)
Policy in effect as of 9-24-2004, form revised 1/30/06, 1/27/10