# Application Form

for the Arbeitsgemeinschaft Deutscher Kunstvereine

☐ Hereby we submit an application for a membership in the ADKV.

## 1. Statistic Data

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|---|---|
| Name of Kunstverein: | |

| Address of Kunstverein (address of exhibitions) | | | | | |
|---|---|---|---|---|---|
| Street address: | | Zip: | | City: | |

| Business address (if different from address of Kunstverein) | | | | | |
|---|---|---|---|---|---|
| Street address: | | Zip: | | City: | |

| | |
|---|---|
| State : | |

| | | | |
|---|---|---|---|
| Telephone: | | Fax: | |

| | | | |
|---|---|---|---|
| E-Mail: | | Homepage: | |

| Please choose one contact person | | |
|---|---|---|
| Chairwoman/Chairman: | | ☐ contact person |
| Managing Director: | | ☐ contact person |
| Art Director: | | ☐ contact person |

| | |
|---|---|
| Year of foundation: | |

| Your members | | |
|---|---|---|
| Number of members: | | |
| Composition: | % Artists | % Others |

| | | | |
|---|---|---|---|
| Opening hours of exhibitions: | | Hours per week: | |

| | |
|---|---|
| Number of exhibitions per year: | |

| | | |
|---|---|---|
| Management of your Verein: | ☐ voluntary | ☐ full-time |

| | | |
|---|---|---|
| Number of employees: | Number of volunteers: | Number of full-time employees: |
| Number of hours per week : | Volunteers: | Full-time employees: |

**ARBEITSGEMEINSCHAFT DEUTSCHER KUNSTVEREINE**

Taubenstr. 1
D-10117 Berlin

Tel. +49 30 611 07 550
Fax +49 30 611 07 470

adkv@kunstvereine.de
www.kunstvereine.de

## 2. We would like to learn more about your Kunstverein

| What are the goals, tasks and content of your Kunstverein? |
|---|
| |

| What forms of art communication do you offer?<br>(e.g. public tours, workshops, artist talks, cooperations with schools, projects etc.) |
|---|
| |

| What is your target group? |
|---|
| |

| How would you define your position within your regional setting? |
|---|
| |

| Do you include members of your Verein in your exhibitions? If yes, in how many exhibitions per year? |
|---|
| |

| Are you willing to offer free entry for members of other Kunstvereine? | ☐ yes | ☐ no |
|---|---|---|

| What expectations do you have concerning a membership at ADKV? |
|---|
| |

| How and when did you learn about ADKV? |
|---|
| |

| Notes |
|---|
| |

In order to get an idea of the work of your Kunstverein, please send us the following material:

☐ the statute of your association (digital),

☐ an overview of the five recent exhibitions/events held within the last couple of years, including images and text max. 10 pages (digital, as PDF), as well as invitations and flyers (via mail)

☐ max. 5 catalogues (via mail)

☐ a copy of your current (or preliminary) notice of exemption

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## 3. In case of successful application

Please send us a selection of  photos (max. 5) for the ADKV website. This selection should include an exterior photo of your Kunstverein as well as impressions of different exhibitions. The photos should be of high qualitiy and in JPEG format. We kindly ask you to send us the copyrights as well as captions for the pictures, so the uploaded pictures contain all the respective information.

## Declaration of consent to the privacy statement

I agree, that the ADKV is allowed to save and process the private information (name, address, telephone number, e-mail-address) collected on its website in consideration of the privacy policy. Furthermore, I agree that all additional information, which I offer voluntarily, can be saved and used under the protection of the private policy.
This declaration of consent can be revoked without specifications of any sort by sending an e-mail to adkv@kunstvereine.de

☐ Hereby I agree to the declaration of consent as stated above

Place: Date: Hereby we confirm the accuracy of our statements ☐

***Please send uns this application form only per e-mail to adkv@kunstvereine.de.***

***Only the invitations/flyers and catalogues are to be send by mail to the address stated below.***

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