



**Artist Agreement for NYHQ Community Art Garden Submission**

I, \_\_\_\_\_ (Artist) warrant and represent that I am the sole legal owner of the right, title and interest in the artwork : \_\_\_\_\_ ( "Artwork") submitted to The New York Hospital Medical Center of Queens ("NYHQ").

I agree that artwork shall become the property of NYHQ and will not be returned to me. Artwork may be published, shown, exhibited, reproduced or otherwise used by NYHQ for any purpose that NYHQ may deem proper.

Artist hereby transfers title of the Artwork to NYHQ as a voluntary contribution with no expectation of compensation now or in the future in connection with any such use.

Artist: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please check one

\_\_\_\_\_ Employee

\_\_\_\_\_ Patient

\_\_\_\_\_ Member of the Community