

## ARTS PROGRAM EXPRESSION OF INTEREST IN DONATING ART

If you would like this form in MS Word format, please contact the SCHF Art Curator via email ([roxanne.fea@sesiahs.health.nsw.gov.au](mailto:roxanne.fea@sesiahs.health.nsw.gov.au)) or on (02) 9382 1188

With the purpose to collect, display, interpret and research visual arts to create a supportive and understanding ambience for the sick children, their families and staff of Sydney Children's Hospital;

I/We:

Of the following address:

Submit this **Expression of Interest** form for donating the following artwork(s) to the permanent collection of the Sydney Children's Hospital Foundation, Randwick, for the benefit of the Hospital's brave patients, their families and carers, the staff and the wider community.

Number of Artworks: \_\_\_\_\_ (for more than 2 artworks, please contact SCHF directly)

### ARTWORK 1:

Title: \_\_\_\_\_

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

Date of production: \_\_\_\_\_ Valuation: \_\_\_\_\_

Medium and general description: \_\_\_\_\_

Size \_\_\_\_\_ Framed?    Y                    N

Value (in AUS dollars) \_\_\_\_\_

### ARTWORK 2:

Title: \_\_\_\_\_

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

Date of production: \_\_\_\_\_ Valuation: \_\_\_\_\_

Medium and general description: \_\_\_\_\_

Size \_\_\_\_\_ Framed?    Y                    N

Value (in AUS dollars) \_\_\_\_\_



I am interested in donating this artwork(s) through the Cultural Gifts Program

**PLEASE SEND THIS FORM TO THE ARTS CURATOR, SCHF by  
EMAIL [roxanne.fea@sesiahs.health.nsw.gov.au](mailto:roxanne.fea@sesiahs.health.nsw.gov.au) or by FAX (02) 9314 6195  
or by POST Locked bag 5, Randwick, NSW 2031**