

mitchell & bartlett orthodontics

5314 W Friendly Avenue
Greensboro, NC 27410

"Art in the Montessori Family" May 2015

1. Artist's Name: _____

2. Type of Visual Art: Number of Pieces: _____

_____ Photography

_____ Jewelry

_____ Painting

_____ Woodwork

_____ Pottery

_____ Other: _____

3. Contact Information:

Cell Phone _____

Home Phone _____

Email Address _____

For each piece on display please prepare a business size card with the title of the work, your name and contact information.

Contact: Sharon Mitchell, 336 681-4144 slmitchell66@gmail.com