



APPLICATION FOR INDOOR ARTS & CRAFTS FESTIVAL 2017

SETUP OCT-7 (late afternoon) SHOW SUN. OCT. 8TH -9-5 NO BOOTH FEES!

NAME _____ DAYTIME PHONE _____

BUSINESS NAME _____ EVENING PHONE _____

STREET ADDRESS _____

CITY/STATE _____ EMAIL ADDRESS _____

- | | | |
|--|--|---|
| <input type="checkbox"/> CERAMICS/POTTERY | <input type="checkbox"/> JUDAICA | <input type="checkbox"/> WOOD |
| <input type="checkbox"/> CHILDREN'S ITEMS | <input type="checkbox"/> LEATHER | <input type="checkbox"/> OTHER (describe below) |
| <input type="checkbox"/> DECORATIVE PAINTING | <input type="checkbox"/> METAL | _____ |
| <input type="checkbox"/> DRAWING/PAINTING | <input type="checkbox"/> MIXED MEDIA | _____ |
| <input type="checkbox"/> FLORAL | <input type="checkbox"/> PHOTOGRAPHY | _____ |
| <input type="checkbox"/> GLASS | <input type="checkbox"/> TEXTILES / CLOTHING | |
| <input type="checkbox"/> JEWELRY | <input type="checkbox"/> TEXTILES/ART/OTHER | |

If you have not participated in this show before please provide a short description of your work and provide 3 photos of your work with this application or email them to 131ellens@gmail.com. _____

- Enclosed is my \$25 non-refundable application fee payable to: WRJ / TBK Sisterhood (before June 1st - \$20)
- I understand that I am responsible for setting up my 10' x 10' booth and removing it and that I will be provided with 1 – 6' or 1-8' table and 1- 2 chairs.
- I need to be close to an electrical outlet and am enclosing an extra \$12 with my registration fee & application.

My products are all made by me and as an exhibitor I agree to the following:

1. I will donate a piece of my art to the show for silent auction or raffle worth \$30 or more.
2. I will donate 20% of my gross sales to a maximum of \$300 at the event to WRJ/ TBK including any orders I take. All payments will be made to WRJ/TBK at a central cashier and no tax will be charged. Artists' checks for their 80% will be mailed out within 3 business days following the show.
3. That TBK, individual merchants or volunteers will not be held responsible for any theft, loss or damage of property or personal injury suffered during or as a result of my participation in the event.
4. I understand that space will be allocated by the committee.

SIGNATURE _____ DATE _____

Please mail applications with \$20/\$25 fee to: WRJ/TBK Sisterhood - 2131 Elmwood Ave. Rochester, NY 14618

Questions: Call Ellen 585 244-7011 or Rona 585 267-7774