PLEASE READ THE FOLLOWING INFORMATION CAREFULLY PRIOR TO COMPLETING THE APPLICATION ON THE REVERSE SIDE!

Dear Exhibitor—
On Saturday, November 21, 2015, Harborside’s PTSO will be sponsoring its 1st Annual Craft & Gift Fair. The fair will be located in the Harborside gymnasium, 913 57th Street, Kenosha, WI. The time of the fair is 8:00 am until 2:00 pm. Setup will be the morning of the event starting at 6:30 a.m. Exhibitors must be set up before 8:00 am and may not take down their exhibit (unless sold out) before 2:00 pm.
We will advertise our Fair in local newspapers (Racine and Kenosha) and will also place posters, flyers and yard signs in businesses in the Kenosha/Racine area.
Food and beverages will be available for purchase during the pancake breakfast (8 a.m.-11:00 a.m.)

FEES AND APPLICATION PROCESS
Space fee $15.00 (plus $5.00 raffle item)
Electric fee $5.00

All entry fees are non-refundable.
Applications will be accepted until the fair is full. We will be accepting and assigning spaces on a first come, first serve basis - early submission of application is suggested.

Exhibitors will be categorized as CRAFT OR GIFT exhibitors.

CRAFT EXHIBITORS: Craft exhibitors are artists or craftsmen who exhibit and sell work which they design and make themselves.

GIFT EXHIBITORS: Gift exhibitors (commercial) are those who display and sell items made by others and are commercially produced. Gourmet foods fall into this category. Only one of each type of commercial vendor is allowed in the Fair. Selection is on a first-come, first-served basis. Please apply early to secure your place.

Please contact Carrie or Sue at 262 359 8400 to reserve space.

MAILING INSTRUCTIONS
Submit all applications to the following address:
Harborside PTSO – Craft Fair
913 57th Street
Kenosha, Wisconsin 53140

Entry fee and raffle item due by Nov. 1st, 2015
2015 Harborside PTSO Craft & Gift Fair
Exhibitor Application

Name ____________________________________________
(Please list your name not a business name)

Address _________________________________________

City State Zip ____________________________________

Telephone: Home (__) _____________________________
Cell (__) _______________________________________

Email __________________________________________

Please list the items to be exhibited.

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Exhibitor’s requests:
(We cannot guarantee special requests) ________________________________

________________________________________________________________________________________

Space: $15.00 ea. (plus $5.00 raffle item)

Number of 9’ X 10’ of Spaces ______

*Each space is supplied with one 8ft. table. You are allowed to bring in additional tables/shelves, however you must fit into the 9x10 space.

Electrical Needed: _______($5.00)

Total Amount Enclosed: _______________________

NOTE: Checks returned for insufficient funds will be considered a show cancellation but said exhibitor will be responsible for payments of a $25.00 returned check fee.

Please check all that apply:

_______ Basketry
_______ Candles, Wax products
_______ Ceramics
_______ Crocheted, Knitted
_______ Dolls
_______ Framed Art
_______ Floral
_______ Food items (Gourmet, pre-packaged)
_______ Gift items – describe
_______ Holiday decorations
_______ Jewelry
_______ Metals / Iron works
_______ Stained glass / Glass products
_______ Photography
_______ Paintings
_______ Quilts, Needlework, Clothing
_______ Soaps, Lotions
_______ Woodworking / Furniture

Other (please describe below):

_______ ______________________________________
_______ ______________________________________

Type of Craft or Gift

For Office Use Only – Do not write below this dotted line

Date Received_______________ Application Number__________________

Booth Number_______________

Exhibitor Payment Information: Amount Paid: _______________________

Check # ______________ Name on Check ____________________________
or

Cash _____________________