

LOCAL CRAFT FAIR APPLICATION

Your Name: _____

Business Name: _____

Business Address: _____

Mailing Address (if different) _____

City, State, ZIP _____

Business phone _____

Cell phone (for text) _____

EMAIL (must be valid) _____

TIN/SSN _____

Have you been a vendor at our Raspberry Days Craft Fair previously? _____

Have you had an application turned down before? _____

Please list the items you will have displayed and for sale in your booth:

You may attach an additional sheet to this page for more room, Please attach clear pictures/images of the items listed.

Do you have any special needs? If so, please list here:

I understand that I must not sell any items that have not been pre-approved by the committee. I agree to sell only the merchandise which is listed on this application, or shown in the attached photos. I understand that submitting an application does not guarantee me space in the Raspberry Days Craft Fair.

I have carefully read the attached rules, regulations & guidelines and agree to abide by them.

VENDOR SIGNATURE

DATE