

102 East Main Street, Waterford, Wisconsin 53185

Phone: 262.534.5911 E-mail: chamber@waterford-wi.org Website: waterford-wi.org

Annual Fall Harvest Fest



Signature

Craft Vendor Application (hand-made arts and crafts items)
Sunday, October 5, 2014
10:00 a.m. – 4:00 p.m.



Date

Whitiord Park, 625 N River Rd, Waterford, W1 53185	
Applicant/Contact Name:	Business Name:
Mailing Address (including city, state, and zip code):	
Phone Number:	E-mail:
The DEADLINE FOR APPLICATIONS is Monday, September 29 th at 4:00 p.m. All vendors are responsible for providing tents (if desired), table, chairs, and display items. Set-up begins no earlier than 8:00 a.m. and all vendors must be ready to operate no later than 9:45 a.m. Vendors are expected to operate for the entire event, with tear-down beginning no earlier than 4:00 p.m. No electricity is available and vehicles are not permitted on the grounds during set-up OR tear-down. Hand-trucks/dollies, wagons, and similar devices are recommended for easier transport of items. The event will go on rain or shine so plan accordingly. No refunds after September 15 th . ** List ALL items you will have for sale on the back of this application or as an attachment. No food or beverages may be sold, unless pre-packaged for off-site consumption (Crafters/Business Vendors are not to serve or sell items in conflict with the Lion's Club Chicken BBQ Dinner. ** Please direct any questions about these policies to the Chamber office at 262-534-5911	
Spaces are approximately 12' x 12' on grassy areas. Confirmations will be sent to you by e-mail. Craft Vendor Fee Please select one: 1 Booth space (\$40) 2 Booth spaces (\$75) Total amount enclosed or charged \$	
Please make checks payable to: Waterford Area Chamber of Commerce Return completed application form and fee to: 102 East Main Street, Waterford, WI 53185	
Payment options accepted: (circle one): Check Cas	sh MasterCard Visa Discover American Express
If you are paying with a credit card complete the information below:	
Name as printed on the card	
Billing address City	State Zip
Credit Card #	Exp Date 3 Digit Code
I have enclosed the required information for consideration including fee and completed application. I have read the event guidelines and accept and agree to abide by the same. I release the Waterford Area Chamber of Commerce, its representatives or agents from any liability for loss, damage, theft or defacement of property or display.	