**Phone** (302)337-8771 **srcenter2@verizon.net**

**Fax** (302)337-8772

**Apple Scrapple Festival**

**Craft Vendor Registration**

**Saturday, October 14, 2017**

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Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Merchandise: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Be Specific

Absolutely no set-ups allowed prior to 5am Saturday on the day of the event. Selling of beverages of any type, as well as food items (with the exception of homemade baked goods) is strictly prohibited and will be enforced. Violation of these rules will result in your removal from this event and forfeiture of registration fees. Parking is limited, so arrive early.

$65.00 fee per 10x10 space checks or money order is payable to the Bridgeville Senior Center for registration and is due with submission of this form.

Amount enclosed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ # of spaces requested \_\_\_\_\_\_\_\_\_\_\_\_

Disclaimer: I agree to all terms and conditions of this registration and participation as a Bridgeville Senior Center, Apple Scrapple Festival Craft Vendor. I hereby release the Bridgeville Senior Citizens Center Inc, The Town of Bridgeville, and the Apple Scrapple Festival Committee, from any and all responsibility for injury or damage to person or property. I understand that the Apple Scrapple Festival is a RAIN or SHINE event and under no circumstances will registration feed, cancellations and no-shows for any reason will result in payment forfeiture. There is absolutely no lobbying outside of paid spaces.

Vendor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_