CROFTON TOWN CLUB CRAFT FAIR
P.O. BOX 3083
CROFTON, MD 21114

Registration Form

LOCATION: THE CROFTON COUNTRY CLUB, 1691 CROFTON PARKWAY, CROFTON, MD 21114

DATE: SATURDAY, SEPTEMBER 25, 2010 (No Rain Date)

TIME: 10:00AM – 4:00PM

***PLEASE PRINT*:**

Vendor Name: _____

Company Name, if any: _____

Street Address: _____

City _____ **State** _____ **Zip**_____

Telephone: _____ **Email Address* :**_____

License Plate of Vehicle to be Used at Fair: _____
State **Number**

Do you have an active Maryland Sales/Use Tax License? YES_____ NO_____

Is this your first Fair with us? YES____ NO____ If No, then Date of last Fair with us? _____

Product Description: _____

_____

_____

Comments / Special Requests: _____

_____

_____

If sharing a booth, all vendors must fill out a separate application and note who they are sharing with. Please document any special requests and/or space assignments in the space provided above. While every effort will be made to accommodate special requests, not all can be honored. Spaces will be assigned on a first come/first served basis and to minimize similar products being sold next to each other.

Submitting both this registration form and space fees signifies my understanding of and agreement to all show rules and regulations.

Number of 10'x10' spaces (at $50 each): _____

Enclosed is a non-refundable check for $_____

Applications and payments can be mailed to: Crofton Town Club Craft Fair, PO Box 3083, Crofton, MD 21114

or electronically submitted online at http://www.croftontownclub.com/Elegant/Craft_Fair_Application.html

If you have any questions, please contact us at craftfair@croftontownclub.com.

*Email is used only for Craft Fair correspondence and will not be shared with anyone. If you do not have an email address, please include a business size, self-addressed, stamped envelope with your application so a confirmation letter may be mailed to you.