

Creative Craft Festival

Application & Contract

SHOW DATE _____

NUMBER OF BOOTH(S) _____ @ _____ SPACE _____

NUMBER OF CORNER BOOTH(S) _____ @ _____ SPACE _____

NUMBER OF TABLES _____ PEGBOARDS _____ @\$5PER _____

NEED ELECTRICITY? YES NO TOTAL DUE \$ _____

***** CANCELLATION *****

Prior to ONE (1) month before show date, the Cleveland County Fair Board will retain 50% of booth rent. After that date, total deposit will be forfeited. NO TRANSFER OF FEES.

Name _____

Address _____

Tax# _____

City _____ State _____ Zip _____

Phone _____ Email _____

Product selling _____

CHECK ONE OR MORE: Handcrafted _____ Market _____ Combination _____

Independent Distributor _____ Name of Company _____

SIGNATURE _____

FOR OFFICE USE ONLY

CASH/CHECK _____ RECEIPT NUMBER _____

AMOUNT\$ _____ Date _____ Booth # _____