



TOWN USE ONLY	
Check#	_____
Amt.:	_____
#Spaces:	_____
#Pictures:	_____
Special Req:	_____

Space Req.	_____
Space Assign:	_____

**HISTORIC OCCOQUAN
FALL ARTS AND CRAFTS SHOW
SEPTEMBER 29 & 30, 2012
EXHIBITOR'S APPLICATION**
PLEASE TYPE OR PRINT LEGIBLY

COMPANY NAME: _____

CONTACT NAME: _____
Last First MI

PHONE: _____ CELL: _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP CODE _____

E-MAIL ADDRESS (important!): _____

Category (check one only & give brief description below):

Baskets	___	Photography	___	Fine Arts	___	Jewelry	___	Sewing	___
Children's items	___	Textiles	___	Food Products	___	Leather	___	Weaving	___
Art	___	Dried flowers	___	Furniture	___	Metal	___	Wood	___
Clothing	___	Drawings	___	Glass	___	Pottery	___	Yard Art	___
								Other	___

Description: _____

Number of 10x10 spaces requested: _____ Have you exhibited in our show before? Yes___ No___.

APPLICATION CHECK LIST: HAVE YOU?...

- ___ Filled out the application completely and legibly?
- ___ Enclosed five (5) 3x5 or 4x6 photographs (one of which shows you producing your craft) labeled with your name & address?
- ___ Included a self-addressed, stamped (\$.88), business size envelope?
- ___ Included payment?
 _____ Option 1 Pay Pal: \$325 plus \$10 Service Fee; Indicate Pay Pal confirmation # _____
 Pay Pal link @ www.occoquancraftshow.com
 _____ Option 2 Check or Money Order: \$325

Applications must be postmarked no later than June 15, 2012

Make checks or money orders payable to "OCCOQUAN SPRING CRAFT SHOW"
 Mail to: Occoquan Spring Arts and Crafts Show, P. O. Box 258, Occoquan, VA 22125
 Show Director will return your photos after the jury process and cash checks upon completion of show placement. **An accepted application is considered a commitment to the show. NO REFUNDS WILL BE MADE.**

Please direct any inquires to Town of Occoquan Spring Arts and Crafts Shows, P.O. Box 258, Occoquan, VA 22125. For additional information call (703) 491-2168 or e-mail director@occoquancraftshow.com.

I have read and understand the attached rules and regulations. I agree not to hold the Town of Occoquan or any of its employees responsible for any injury, property damage, or theft of any kind, nor will I be a part to any legal action against anyone mentioned above. I also agree to be responsible for the collection of Virginia State Sales Tax.

SIGNATURE: _____ DATE: _____