40th Annual St. Peter PTA Craft Festival

415 Atlantic Avenue, Pt. Pleasant Beach, NJ 08742
www.stpschool.org         spscraft_fair@yahoo.com

Saturday November 11th, 2017
9:00 a.m. to 5:00 p.m.

General Information

Fees: $100.00 per space (approx. 6' x 10')
      $125.00 per space (approx. 6' x 15')

Cancellation Policy: Once accepted into our craft fair, the fee is non-refundable after October 7, 2017 unless we are able to fill the vacated spot. Cancellations after November 1, 2017 are nonrefundable.

Deadlines/Important Dates:
July 1, 2017: Applications must be received in order to be part of the initial jury process.

July, 2017: Applications are reviewed

August, 2017: Acceptance/Non-Acceptance Notification begins (payment will be returned if crafter is not accepted)

September, 2017: The final jury process takes place. Any applications received at this time will be considered on an individual basis only if space is still available.

Set-Up: Friday, November 10, 2017 @ 4:00 p.m. - 7:00 p.m.

Other Important Information:
• If you DO NOT arrive by 8:30 a.m. the morning of the show, your space may be given away.
• All vendors are required to donate a craft item to our raffle. Please bring your raffle item, with a business card, to the raffle table during the set-up period, so that we may properly organize and display all items.
• For the convenience of both our vendors and visitors, the entire craft fair will now be located in the school auditorium, cafeteria, and first floor hallway. This will allow barrier-free access to all vendors.
• We have two applications available; one for crafters and one for direct-sales companies. Note: we will only accept one sales representative from each direct-sales company. This will be determined based on the order in which the applications are received.
Saint Peter PTA 40th Annual Craft Fair Application  
(CRAFTERS APPLICATION)

Name: ____________________________________________ Phone: (___) ______________

Business Name: ____________________________________________

e-mail address: ____________________________________________

Address: ____________________________________________ City: ____________________________

State: _______ Zip Code: ______________ License Plate # ____________________________

(Must be included for application to be processed)

The St. Peter PTA Craft Fair seeks to promote vendors selling high-quality, handcrafted items. Absolutely no part of any vendor’s display may include buy-and-sell items, imports, or work that is commercially manufactured by someone other than the artisans. Any vendor who drastically misrepresents his/her product on this application or who displays items that are not handcrafted may be asked to remove those items or leave the show and forfeit their table fee.

Description (Required): Please provide a SHORT, clear description of your work/product.

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Space Requested (check one): ___ $100.00 (approx. 6' x 10')

___ $125.00 (approx. 6' x 15')

Location Requested: ___ Auditorium ___ Cafeteria ___ School Hallway ___ Any Location

We will do our best to place you where you request, but location cannot be guaranteed.

Electricity Required? ___ Yes ___ No (limited Availability on a first come first serve basis)

Table Rental – 6 x 2 table ($10 each): ___ Yes? Number of tables needed ______

Wait List: ___ Yes, keep me on your waiting list ___ No, return my pictures/check immediately

Would you like to be included in our virtual advertisement? Please send a picture to Annmarie Hanley at awh.slp@gmail.com by July 1st to be included.
ALL PAYMENTS WILL BE RETURNED IF CRAFTER IS NOT ACCEPTED
For wait-list status, the Craft Fair Committee requires that all pictures and checks be held on file. You will be notified if an opening becomes available. If nothing become available and/or you would like to be removed from the wait list, your check will be returned to you in your self-addressed stamped envelope. Past acceptance is not a guarantee of future acceptance into the show.

Reminder: Each crafter is required to provide one item of their choice from their inventory to our raffle table. The raffle table helps to offset our costs and serves as an advertisement for you as well. With this in mind, please make sure that your donation is reflective of the work you create. Please bring your item and business card to the raffle table during set-up.

Release: I understand, accept, and will abide by the rules and policies set forth in this application. By signing this application, I declare that the items to be displayed are original, that I have had direct involvement in the making of each item offered for sale, and that it is consistent with the standards set forth in this application. I release St. Peter School, the Craft Fair Committee, all sponsoring organizations, agents, board, employees and volunteers from any responsibility, personal liability, claims, loss or damage arising out of or in conjunction with my participation in the St. Peter PTA 40th Annual Craft Fair. I acknowledge that all information I have provided in this application is true and correct.

Signature: ____________________________ Date: ________________

Please include the following with your application in order for it to be processed:

1. Photos of both your craft (close-up), and your display
2. Check made payable to St. Peter School PTA
3. Self-Addressed stamped envelope

Mail to: St. Peter PTA Craft Festival
        P.O. Box 1166
        Point Pleasant Beach NJ, 08742
Saint Peter PTA 40th Annual Craft Fair Application
(DIRECT-SALES APPLICATION)

Name: _____________________________ Phone: (___) ____________

Company Name: _____________________________

E-mail address: _____________________________________________

Address: _____________________________________________ City: _____________________________

State: ______ Zip Code: __________ License Plate # ____________________
(Must be included for application to be processed)

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Description (Required): Please provide a SHORT, clear description of your company’s product(s).

_____________________________________________________________________________________

_____________________________________________________________________________________

Space Requested (check one): ___ $100.00 (approx. 6’ x 10’)
                       ___ $125.00 (approx. 6’ x 15’)

Location Requested: ___ Auditorium ___ Cafeteria ___ School Hallway ___ Any Location
We will do our best to place you where you request, but location cannot be guaranteed.

Electricity Required? ___ Yes ___ No (limited Availability on a first come first serve basis)

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Signature: ___________________________ Date: ________________

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