

FRIENDS of Sherborn Council on Aging
Holiday Craft and Gift Bazaar & Gourmet Cookie Sale

December 3, 2011
Sherborn Community Center (1858 Town House)
Sherborn, MA 01770

Application Form

Artist's Name: _____

Business Name: _____

Address: _____

City, State, Zip Code _____

Phone _____ E-mail _____

Description of items to be featured: _____

Price range of items: _____

Space Rental Request (please check all that apply)

- \$65 for the space. (8 feet wide by 6 feet deep)
 - Exhibitor supplies own table.
 - \$10 for a 6 foot rectangular or 48 inch round table
 - \$15 for an 8 foot rectangular or 60 inch round table
- \$5 electricity (limited availability)

Total amount: _____

Raffle donation - please describe item: _____

In addition to this contract, I have enclosed:

- My check for space fee made payable to Friends of Sherborn Council on Aging (fully refundable if application is not accepted)
- Two photos of my work emailed in jpeg format to bazaar@friendsofsherborncoa.org
- My business card

Please read and sign the following:

I have read the application and exhibitor information and agree to the regulations

Exhibitor Signature

Date

Send completed application, check for the space fee, and business card to:

FRIENDS of Sherborn Council on Aging
Holiday Craft and Gift Bazaar & Gourmet Cookie Sale
P.O. Box 271
Sherborn, MA 01770
www.friendsofsherborncoa.org