**THIS AREA FOR CHAIRMAN’S USE ONLY. DO NOT WRITE IN THIS AREA.**

Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount Paid\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Paid \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cash \_\_\_\_\_\_\_ Check \_\_\_\_\_\_\_ Check # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building # Assigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Table # or Space # Assigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HOLLYWOOD VOLUNTEER RESCUE SQUAD AUXILIARY**

**CRAFT & VENDOR SHOW**

**TABLE/DISPLAY SPACE REGISTRATION FORM**

**ST. MARY’S COUNTY FAIRGROUNDS**

**SATURDAY, NOVEMBER 12, 2016**

Please indicate below what you wish to rent:

8’ X 4’ Space with Table ($35.00 each) Yes\_\_\_\_\_\_\_\_ How Many Tables \_\_\_\_\_\_\_\_\_

8’ X 4’ Space only (No Table) ($35.00 each) Yes\_\_\_\_\_\_\_\_ How Many Spaces \_\_\_\_\_\_\_\_\_

Do you require chair(s) (Limit of two) Yes\_\_\_\_\_\_\_\_ How Many Chairs \_\_\_\_\_\_\_\_\_

Do you require an electrical outlet\* Yes\_\_\_\_\_\_\_\_

**\*NOTE:** There is no additional charge for electric access. However, there is no guarantee that electric access will be available to you. Electric is only available on wall spaces. Electric access is limited and is assigned on a first come basis. **HVRSA does not furnish cords for hookup to electrical outlets.**

Please print all information requested below.

Type of Crafts or Product: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Space is limited so please return your application early. No space is guaranteed for 2016 unless your registration form and full fee payment are submitted by **September 30, 2016.** Setup time will be 8:00 a.m. to 9:45 a.m.

++ **Craft/Vendor Show Registration is non-transferable.** Vendor Parking will be in an assigned area.

**HVRSA RESERVES THE RIGHT TO LIMIT THE NUMBER OF TABLES/SPACES PER CRAFTER/VENDOR.**

**Waiver on Back: (MUST BE SIGNED)**

**HOLLYWOOD VOLUNTEER RESCUE SQUAD AUXILIARY**

**CRAFT & VENDOR SHOW 2016**

**WAIVER:**

As a participant in the Craft & Vendor Show, it is understood that I/we the undersigned or any member of my/our party will not hold the Hollywood Volunteer Rescue Squad and Auxiliary, or any person working with the Craft & Vendor Show, responsible for any personal injury, damage to or theft of any property, nor will I/we be a party to any legal action taken against them. I/we, the undersigned, agree to abide by the guidelines set forth by this Craft & Vendor Show Committee.

Signature(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please make check or money order payable to the Hollywood Volunteer Rescue Squad Auxiliary.**

**Please mail to:**

**Hollywood Volunteer Rescue Squad Auxiliary**

**P.O. Box 94**

**Hollywood, Maryland 20636**

**Attn: Craft & Vendor Show**

Completed, signed Registration Form and check or money order must be received prior to **September 30, 2016**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chairman – HVRSA

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co - Chairman – HVRSA