

## YOUNG Artisan Application – July 13-16, 2017 Applications Accepted March 1st

The hours and days for the Young Artisan sales are different from those of the People's Choice Festival. Young Artisan sales are from 10:00 until 5:00 Thursday, Friday, and Saturday.

SHOW FEES: \$10.00 per day for a table

Each artisan may participate one, two, or three days.

Due to the large number of application, NO DOUBLE BOOTHS are permitted

There will be NO refund of fees if cancellation is made after June 1st.

The People's Choice Festival will include the sales of original artwork and crafts designed and created by youth between the ages of 8 and 17.

An open tent will be provided to accommodate youth sales. Spaces are limited and will be allocated on the first who apply, determined by postmark. There is no jury process for Young Artisans. Please be aware that spaces fill quickly. We advise you apply early.

An acceptance letter will be mailed confirming the day or days of participation and giving thorough instructions for arriving and setting up for the show.

The People's Choice Festival will provide one 30 in. by 6 ft. table and two chairs per booth. Each young artist will be responsible for providing other display needs and/or table covers if needed. They are responsible for setting up and tearing down their displays. PARENTS PELASE NOTE THAT CARS MAY ONLY BE DRIVEN ONTO THE LAWN AREA BETWEEEN 8:30 AM AND 9:30 AM. At 5:00 pm any materials that you wish to take home must be carried from the lawn area. There are limited golf carts available to help you to the side entrance.

## Popguns, bows and arrows, or other potentially dangerous items may not be sold.

- TO APPLY: Send the following: 1. A completed application
  - 2. A check made out to the People's Choice Festival
  - 3. A self-addressed, stamped envelope. REQUIRED

SEND completed application and check to:

People's Choice Young Artisans c/o Melissa Williams 217 North Church Street Boalsburg, PA 16827 814-470-5105

## PEOPLE'S CHOICE YOUNG ARTISAN APPLICATION

RETURN THIS PORTION				
Name(s)				
Address				
City		 State	Zip Code	
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		Phone		
Describe your product in a	s much detail as possible:			
Circle the days(s) you wish	to participate.			
Thursday, July 13th	Friday, July 14th	Saturday, Ju	uly 15 <sup>th</sup>	
Amount Enclosed:		Check #		
	hat I am responsible for my calso give permission for my c			
	ould arise and I cannot be co			
Child's Name				
Homo Dhono		Data		
nome Phone		Date		
Parent's Name	Name		Work Phone	
Parent's Signature				
PLEASE NOTE: If more to	than one person is applying f	or a booth, the pa	rent/guardian of each child	

<u>PLEASE NOTE</u>: If more than one person is applying for a booth, the parent/guardian of each child must complete and sign an application form. This form is maintained on site in case of an emergency. Please feel free to make copies of the form.

**PLEASE ENCLOSE**: Your application

A check for the correct amount A self-addressed stamped envelope