YOUNG Artisan Application – July 9 -12, 2020

Applications Accepted After March 15th

The hours and days for the Young Artisan sales are different from those of the People's Choice Festival. Young Artisan sales are 10:00 until 5:00 Thursday, Friday and Saturday. No sales permitted after 5:00 pm.

SHOW FEES: \$10.00 per day for a table

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

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

There will be NO refund of fees for cancellation 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 <u>8 and 18</u>.

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 or e-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 6ft. 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. <u>ALL SALES END AT 5 PM</u>.

PARENTS PELASE NOTE THAT CARS MAY ONLY BE DRIVEN ONTO THE FIELD 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
E-Mail	Phon	Phone	
Describe your product in as i			
Circle the days(s) you wish to	o participate.		
Thursday, July 9 th	Friday, July 10 th	Saturday, July	11 th
Amount Enclosed:	Check #		
PARENTS: I understand that used in his/her artwork. I als Center if an emergency shou	o give permission for my c	hild to be treated at I	Mount Nittany Medical
Child's Name			
Home Phone		Date	
Parent's Name		Work Phone	
Parent's Signature			

PLEASE NOTE: 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