



Winter Wishes Craft Faire Vendor Application

Contact Name: _____

Business Name: _____

Address: _____

City, State, Zip: _____

Contact Phone Number: _____

Contact Email Address: _____

Craft Description (list items to be sold at this faire):

Print first name for name tags of each sales staff (limit 2):

Booth size is approximately 10X10

Booth Fee; \$35.00 Without power _____ \$40.00 with power _____
\$5.00 off for CCC Members

Cancellation/Refund Policy: 50% refund for cancellation received no later than 30 days prior to event, No refund 30 days or less from date of event.

Donate item for Customer drawing. Please provide item description and value:

Issue check to Crescent Community Club & Mail to: Charlene Swanson PO Box 131
Crescent Or. 97733

Signature

Date
