

# OLMC HOLIDAY ARTISAN MARKET 2017 CONTRACT

If you wish to participate, please send the following items to us as soon as possible.

1. Completed copy of the contract. Your signature must be at the bottom of contract agreeing to the terms and conditions of the Artisan Market.
2. A check made payable to OLMC H&S Association for the appropriate amount.
3. Photograph of your craft(s), or website address containing pictures of your craft.
4. Include a self-addressed, stamped, letter size envelope for confirmation.  
*(If you prefer your confirmation by e-mail, please make sure your e-mail address is on your contract)*

*Retain this part of the contract for your records. In order to be accepted, your contract must be signed. Please make sure you complete both pages of the contract.*

Please be advised that applications are accepted on a first come, first served basis and are numbered as they are received. This applies to all prior vendors as well as all new vendors. We cannot accept any hand delivered applications. **We will make every effort to accommodate specific requests.** So please mail your application as soon as possible.

All applications and inquiries about the Artisan Market should be sent to:

**OLMC HOLIDAY ARTISAN MARKET  
P.O. Box 1503  
Doylestown, PA 18901**

**\*\* PLEASE READ ABOUT OUR NEW DAYS AND HOURS OF THIS EVENT, OUR NEW POLICY ON ACCEPTABLE VENDORS AND OUR NEW SCHOOL MAP, HALLWAY NUMBERS HAVE CHANGED \*\***

**OUR LADY OF MOUNT CARMEL  
2017 HOLIDAY ARTISAN MARKET CONTRACT**

**Terms and Conditions**

- 1) The vendor will be responsible for any damage he/she may cause and will leave their space clean and orderly upon departure.
- 2) The vendor agrees to release Our Lady of Mount Carmel School and Our Lady of Mount Carmel Home and School Association from any loss due to fire, theft, breakage or other cause, and all liability for injury during the show.
- 3) If participating as an vendor, the OLMC Artisan Market Committee reserves the right to have items removed that are considered not appropriately handmade. Items cannot be simply purchased for resale. **New this year, we will allow 12 direct sale/third party vendors in the upper hallway location only, hallway spaces 7-18. Only 1 of each direct sale/third party vendor will be allowed. Only 1 direct sale/third party jewelry vendor will be allowed into the Artisan Market.**
- 4) Table assignments and electricity are assigned on a first come, first served basis. Spaces are assigned in the following order: 1- auditorium, 2- cafeteria, and 3- hallways. **We will attempt to accommodate specific requests; however, we cannot guarantee the same table assignment from previous years.**
- 5) All applications must be submitted by mail and will be numbered as received. Hand delivered applications will not be accepted.
- 6) **All accepted applications are non-refundable** . Applications and checks received after we are filled to capacity will be returned to the applicant.
- 7) Due to fire regulations, items cannot be placed in the aisles in front of the tables and all backdrops and screens must conform to your allotted space. **No exceptions will be made. All open flames (candles, potpourri warmers, etc.) are prohibited.**
- 8) All vendors are obligated to stay through the close of the two-day Artisan Market. **No vendor may breakdown their booth before 4 PM on Saturday, November 4, 2017.**

**\*Set-up hours are as follows:**

<b>Friday, November 3, 2017</b>	<b>Set-up</b>	<b>3:00 PM -6:00 PM</b>
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**\*Please adhere to this schedule. Vendors will not be allowed in early!**

**Craft Fair Hours: (Please note the new hours)**

<b>Friday, November 3, 2017</b>	<b>Fair hours</b>	<b>6:30 PM -9:30 PM</b>
<b>Saturday, November 4, 2017</b>	<b>Fair hours</b>	<b>9:00 AM- 4:00 PM</b>

## Our Lady of Mt. Carmel 2017 Holiday Artisan Market Contract

NAME \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

WEBSITE \_\_\_\_\_

**DETAILED CRAFT DESCRIPTION:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

LOCATION	FEE	AMOUNT
AUDITORIUM (8 ft. x 5 ft.) Table with two chairs behind table.	\$110.00	_____
CAFETERIA (8 ft. x 5 ft.) Table with two chairs behind table.	\$100.00	_____
HALLWAYS (12 ft. x 3 ft.) Table against the wall with two chairs on either side of the table.	\$75.00	_____
ELECTRICAL OUTLET Electrical cords will not be supplied.	\$5.00	_____
CHECK # _____	TOTAL CHECK AMOUNT _____	

**TABLE REQUIREMENTS** (If nothing is marked off, we will assume you are bringing your own table and chairs.)

Select: \_\_\_\_\_ 8 ft x 30" Table      \_\_\_\_\_ 6 ft. x 30" Table      \_\_\_\_\_ NO TABLE

Select: \_\_\_\_\_ Two Chairs      \_\_\_\_\_ One Chair      \_\_\_\_\_ NO CHAIRS

Please complete the following information as you would like it to appear in the Artisan Market website. **Leave blank any information you would not like to appear on the website. (Please note: your name and business name will be printed in the Artisan Market directional map handed out to all shoppers.)**

**ARTISAN MARKET DIRECTORY LISTING**

NAME: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL \_\_\_\_\_

WEBSITE \_\_\_\_\_

CRAFT DESCRIPTION: (up to 80 characters)

\_\_\_\_\_

**CONFIRMATION**

\_\_\_\_\_ **YES**, I would like to have my confirmation sent to me by email.

\_\_\_\_\_ **NO**, please mail me my confirmation in the self-addressed envelope that I have enclosed.

**VENDOR REFERRAL**

Do you know a vendor who might be interested in the Artisan Market?

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

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

Craft: \_\_\_\_\_

I agree to honor the terms and conditions of the Artisan Market presented by the OLMC Home & School Association.

SIGNATURE: \_\_\_\_\_