

Lydia's Guild

2010 Fine Arts and Craft Show

Name _____ Name for Final Check _____

Address _____

City, State, Zip _____

Email _____ Website _____

Telephone _____ Cell Phone _____

PLEASE GIVE A DETAILED DESCRIPTION OF CRAFT BELOW, USE BACK OF FORM IF NEEDED. PLEASE ALSO INCLUDE PHOTOS OF YOUR WORK AND DISPLAY. Returning Crafters, please send photos or describe any NEW ITEMS:

WORK SHIFTS: Will be scheduled according to the date that your application is received. Please indicate dates and times below. Call Gail at 610-869-4444 with any questions.

First Shift Date _____ AM, PM, Eve Second Shift Date _____ AM, PM, Eve

POST CARDS: Please indicate the number of post cards you can use for distribution prior to the show _____

Applications that are selected and approved through the jurying process are viewed as a commitment to participate in the 2010 Lydia's Guild Fine Arts and Craft Show. No refunds will be given after an application is accepted.

The undersigned does hereby forever discharge, release and hold harmless Winterwoods, LLC and all of its agents from any and all manner or action of suits, damages or claims whatsoever arising from any loss, theft or damage to person or property of the undersigned while participating in this event and hereby consent to the enforcement of all rules and regulations of the show.

Signature _____ Date _____

Registration Fee: \$ _____ Table Rental: \$ _____ Total Enclosed: \$ _____

Send application with check payable to **Winterwoods, LLC** to the following address:
Gail Wills 485 Ewing Road, West Grove, PA 19390-9166
Please call Gail Wills at 610-869-4444 with any application questions you may have. Thank you!