## Vermont Maple Festival, Inc. April 25-27, 2025 Craft & Specialty Food Show Entry Form

Please print clearly & return form before February 15, 2025

| NAME:  |  |
|--|--|
| NAME:(Please ]   | print or type)   |
| MAILING ADDRESS:   |  |
|  |  |
| Must Have: TAX ID #:   | LICENSE PLATE #:   |
| TELEPHONE NUMBER:  | CELL PHONE NUMBER:   |
| EMAIL ADDRESS:   | (next year all applications will be sent via email)  |
|  | A photo is to be sent with application of crafts or food, please do not bine Specialty Foods with Arts & Crafts per space)                           |
| PLEASE TAKE NOTICE: There are NO lights just in case your space needs extra lights |  |
| 8'x 6' SPACE: (One space per crafter/spe   | sialty food) \$115.00  |
| 10'x 8' SPACE: (One space per crafter/spe  | <u> </u>   |
| 20'x 8' SPACE: (One space per crafter/spe  | cialty food) \$220.00  |
| TOTAL AMOUNT ENCLOSED  | se needed 6' Table or 8' Table \$16.00   |
| SPECIALTY FOODS: Along with paym   | e sign the <u>Hold Harmless Agreement</u> (separate from application). ent please send in <u>Insurance</u> & sign the <u>Hold Harmless Agreement</u> |
| *I have read, understand and agree to the re                                       | ales of the 2025 Vermont Maple Festival, Inc., Craft & Specialty Food Show.  |
| SIGNATURE:   | DATE:  |
| Name Tags will be given to exhibitors, plea  | se <b>PRINT</b> each full name that will need a name tag.  |

Please make check payable to: VERMONT MAPLE FESTIVAL, INC.

RETURN TO: Michelle Deslandes, 1914 Sheldon Road, Apt. A, St. Albans, VT 05478

PRINT & SIGN HOLD HARMLESS AGREEMENT IN YOUR CATAGORY.

If Hold Harmless Agreement isn't signed the Application & Payment will be returned.