

**Second Saturdays Artisan Market Form
2016 Participant Form**



Name _____

Address _____ City _____

State _____ Zip _____ Phone _____

Email _____ Alternate Phone _____

Business or Organization Name _____

What does your booth/business consist of? What do you promote or sell?

Each booth space is 10x10. Please indicate if you need one or two spaces. Circle One.

(1) 10 x 10 space (2) 10 x 10 space

**Non- Members Pricing:
(Please Circle one)**

For Profit 10x10 Space: \$20.00
For Profit Food Vendor Space: \$30.00
Not for Profit 10x10 Space: \$10.00

Free 10x10 space for all Second Saturday Members and Sponsors.

Our event begins at 10:00 AM each Second Saturday. Set up begins anytime after 8:30 A.M. Please circle which dates you are interested in, or any dates you are reserving.

May 14 June 11 July 9 August 13 Sept 10 Oct 8

Upon approval, All checks are made payable to "Second Saturdays of Nappanee".
Please send checks to
Nappanee Second Saturdays
PO BOX 214
Nappanee, IN 46550.

Terms & Policies

Policies

1. All vendors are required to keep their area clean and free of hazards. No one is permitted to leave or discard merchandise, boxes or cartons on Nappanee, IN property. All trash must be removed by the vendor.
2. Vendors may not place items for display out of their designated area or in any walkway or aisle. Aisles and walkways are to be kept clear for customer traffic at all times.
3. All merchandise must be removed from spaces by 5 p.m. (when the mall closes).
4. Vendors will conduct themselves in a professional, courteous manner at all times. The use of loud, profane or abusive language is not permitted.
5. Set-up time for vendors is 9:00 AM. Vendor will be set-up and ready by 10 am. Vendor will have vacated space by the designated time.
6. Vendors are responsible to collect and report the appropriate sales tax where applicable.
7. Vendor assumes all risk and liability for injury, damage or loss due to theft, accident, negligence, fire or other hazards.

I have read and agree to abide by and adhere to the following guidelines.

Signature of Vendor

_____ Date _____