**FIRST UNITED METHODIST WINTER FANTASY CRAFT FAIR**

 EXHIBITOR’S APPLICATION FOR DECEMBER 2, 2023

This agreement between **First United Methodist Church** and (your name here:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) for Exhibit space at FUMC in Horseheads, NY

The Winter Fantasy Show will be held at FUMC, 1034 W. Broad St., Horseheads, NY 14845 on **Saturday, December 2, 2023** from 9 am to 3 pm. Please describe type of work to be exhibited:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

1. Set up time is the Friday before the event from 5 pm to 8 pm and Saturday 7am to 9:00am prior to the show unless prior arrangements are made. There will be no set up Friday before 2 pm even if you call and ask for a special set up time. We are not done setting up the church and it is not safe for you to set up at that time. I will call you if you select a large space and it is no longer available. Vendors are expected to stay until 3 pm, weather permitting.
2. **CHECK** the spaces desired: **All display must fit within your designated space.**  2 chairs are furnished.

( ) 1 space (approx. 5ft x8ft) with one table $30.00

( ) 1 space (approx. 5ftx8ft) with two tables $35.00

( ) 2 adjoining spaces (5ftx16ft approx.) with total of two tables **if available** $55.00

( ) electricity needed (only certain spots have electricity) N/C

 **I prefer the same space as 2022: YES or NO\_\_\_\_**

 ***YOUR LAST YEAR’S SPACE WILL NOT BE HELD FOR YOU AFTER \*\*September 25th \*\****

1. Make your check payable to **First United Methodist Church Horseheads** and put Craft Fair on subject line. Your spot is Not reserved if we get an application but a check made out to me instead of the church. put a diagram of your space on the back of THIS FORM. The fee is non-returnable.
2. Send this completed form, check and diagram of your space to: Barb Burdette, FUMC, 1034 West Broad Street, Horseheads, NY 14845.
3. **SPACE IS LIMITED.** Your cancelled check is your receipt. **Call the church office at 607-739-1943** with any questions.
4. *EXHIBITOR’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_*

*Business name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

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

*City/State/ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

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

**The only refund will be if cancellation of event due to Covid-19.**