

PHELPS MILL FESTIVAL 2008 July 12-13

DETACH and RETURN with entry fees and **padded envelope, self-addressed**, stamped with **sufficient postage to return your slides**, and postmarked no later than midnight of **February 15, 2008**. INCOMPLETE APPLICATIONS WILL BE RETURNED WITHOUT PROCESSING! (This includes your signature and others involved on reverse side.)

For Office Use Only:

Mail to: Phelps Mill Festival
Teresa Brause, Festival Manager
15145 135th Ave • Fergus Falls, MN 56537
Telephone 218-739-5377 • FAX 218-739-0823 • Website www.phelpsmillfestival.com • Email: PMFestival@dishmail.net

Please **type** or **print** carefully:

NAMES of INDIVIDUALS(s) EXHIBITING _____ PHONE _____

ADDRESS _____

Street _____ City and State _____ Zip Code _____
EMAIL ADDRESS _____ MINNESOTA SALES TAX# _____

MEDIA CATEGORY _____ List and describe items to be exhibited: _____

CHECK ALL BOXES WHERE APPROPRIATE

____ I am unable to apply for the show this year. Please keep me on your mailing list.

MAKE SEPARATE CHECKS (Jury Fee & Booth Fee) **PAYABLE TO: PHELPS MILL FESTIVAL**

____ Jury Fee of **\$5.00** (Non-Refundable)

____ \$150 for 1 space (10x10)

____ \$225 for 1½ spaces (10x15)

____ \$300 for 2 spaces (10x20) Limit

____ Number of slides _____ CD

____ Return padded envelope provided: stamped, self-addressed

____ Sufficient postage on **both** envelopes

For office use only:
Sales Tax _____
Vendor Policy _____
Insurance Policy _____
Special Needs _____

Previous Exhibitor:

____ Yes ____ No

I Will Use A Canopy:

Yes ____ No ____

I HAVE READ THE APPLICATION and agree to abide by the rules and regulations of the Festival, understanding that failing to do so may result in my being asked to leave the Show, without refund, and that I may not be eligible for future Festivals. I will display **only** original items handmade by myself, **supervise the Booth myself**, and have my booth setup by 9:15 am each day, and break down each day **after** closing time. I further agree to indemnify and hold harmless PHELPS MILL COUNTRY and Otter Tail County for any losses, claims, or liability that may arise as a result of my entry in the Show.

Signed _____ Date _____

Must be signed by all parties involved