

# ROSE HILL FALL FESTIVAL CRAFT FAIR

October 10, 2020

## REGISTRATION FORM

ALL INFORMATION MUST BE COMPLETED FOR BOOTH TO BE RESERVED

Name (Please Print) \_\_\_\_\_ Company: \_\_\_\_\_

Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip Code \_\_\_\_\_

Email Address: \_\_\_\_\_

**Booth Fee:**     **\$30 prior to October 1**                     **Craft Booths Inside**  
                  **\$35 after October 1**                             **Packaged Foods Booths Inside**  
                  **\$ 5 Extra for Electricity**                         **Game Booths Outside**  
                  **\$ 25 for Tables (\$30 On or after October 1) *limited number available***  
                  **\$ 5 per Chair (\$10 On or after October 1) *limited number available***

**Number of Booths Required** \_\_\_\_\_

**Rented Tables** \_\_\_\_\_                     **Rented Chairs** \_\_\_\_\_                     **Electricity** \_\_\_\_\_

**Total \$** \_\_\_\_\_

**Check Type of Booth:**

\_\_\_\_\_ **Craft**                     \_\_\_\_\_ **Packaged Food**                     \_\_\_\_\_ **Game**  
\_\_\_\_\_ **Information**                     \_\_\_\_\_ **Other**

**Two Locations are used for craft booths, please check your preference.**

\_\_\_\_\_ **Multi Purpose Room**   \_\_\_\_\_ **Middle School Gym**   \_\_\_\_\_ **Hallway**   \_\_\_\_\_ **No Preference**

Describe items in your booth:

All booths and products must be approved by the Rose Hill Fall Festival Committee  
Entries will be dated and assigned as they are received.

**Make checks payable to Rose Hill Fall Festival**

Mail Registration Forms to:

Craft Fair  
Rose Hill Fall Festival  
PO Box 121  
Rose Hill, KS 67133



For additional information contact RHRC at 316-776-9880

**I hereby agree to abide by the rules and regulations of the Rose Hill Fall Festival and acknowledge that the Rose Hill Fall Festival, a non-profit organization, it's agents, employees, representatives or assigns, shall not be liable for theft, injury, or accident on the festival premises. I understand that I am responsible for the collection and reporting of State Sales Tax.**

**Date:** \_\_\_\_\_ **Signed:** \_\_\_\_\_

Approved and accepted by the Rose Hill Fall Festival, the \_\_\_\_\_ day of \_\_\_\_\_ 2020.

Authorized Representative: \_\_\_\_\_