



# Blue Crab Festival, Inc.

Post Office Box 736  
Little River, SC 29566

# ARTS & CRAFTS VENDOR APPLICATION

**Saturday May 15, 2010 & Sunday May 16, 2010**

On the Waterfront in Historic Little River

NAME OF VENDOR \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
(PRINT VERY CLEARLY)

Mailing Address \_\_\_\_\_  
Street/Box City State Zip

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Description of Art/Craft (Be Specific) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Festival Workers (2 Nametags Will Be Provided at No Cost) \_\_\_\_\_  
\_\_\_\_\_

Price Range of Items \_\_\_\_\_ Special Needs/Requests \_\_\_\_\_  
\_\_\_\_\_

**FEES:**

Space Rent (10' x 10')	\$200.00 (\$235.00 after Feb. 1)	<u>Amount Remitted</u> _____
Additional Space (10' x 10')	\$150.00 (\$175.00 after Feb. 1)	_____
Additional Worker Passes	\$5.00 each	_____
Electricity (if needed)	\$25.00	_____
Juried Fee	\$25.00	_____

**TOTAL AMOUNT REMITTED** \_\_\_\_\_

I hereby agree to abide by the rules and regulations set forth by the Blue Crab Festival, Inc., and any other regulations as may be established. I understand and agree that there will be no refunds and that decisions of the Festival Committee are final. Further, I hereby release and forever discharge the Blue Crab Festival, Inc., Little River, SC, and their agents and representatives, from any responsibility, personal liability, loss, claims, or damage arising out of or in connection with this festival.

\_\_\_\_\_  
Signature of Applicant Date

**Sign and Mail with check or money order to:**

**Blue Crab Festival, Inc.  
PO Box 736  
Little River, SC 29566**

**Contact: Hubert Bullard, Vendor Chair  
Phone: (843) 385-3180**