

ANNUAL WINTER HARBOR LOBSTER FESTIVAL
Saturday August 10, 9am-4pm
Application Form

Crafter's Name: _____

Business Name: _____

Address: _____

Town/State/ Zip Code: _____

Phone: _____

Email: _____

State Sales Tax ID#: _____

Please check one:

____ \$60.00 Outdoor Space (approximately 10 feet wide x 15 feet deep)

____ \$60.00 Indoor Space (about 8 feet wide x 10 feet deep)

____ \$75.00 Outdoor Food Vendor (approximately 20 feet wide x 15 feet deep)

Items intending to sell (only handcrafted items accepted):

Special requests: _____

Comments/Suggestions: _____

Please make checks payable to: Schoodic Area Chamber of Commerce

Mail to: Schoodic Area Chamber of Commerce Craft Fair

PO Box 381, Winter Harbor ME 04693

Deadline: July 1

For Office Use:

Date Received:

Amount Received:

Assigned Space: Inside: _____ Outside: _____