**Craft Vendor Contract**

**Halloween Crafts & Collectibles**

**Saturday, October 26th 2024**

**DEADLINE TO REGISTER** (as long as vendor space is available)

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_

Description of items offered at event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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G**eneral Guidelines:**

Halloween Crafts & Collectibles will be held at the Emlen Physick Estate, 1048 Washington Street, on Saturday October 26th from 10:00am – 3:00pm. It is a 10X10 space.

\* We ask that each vendor bring candy. We are advertising Trick or Treating on the grounds.

\*No generators.

\*We only accept handmade, original pieces of art or collectibles.

\*Spaces will be assigned upon arrival at the Emlen Physick Estate Set-up time begins at 7am. We will not accept anyone after 9:30am.

**Insurance Requirements:**

Your application MUST have proof of insurance, listing the Mid-Atlantic Center for the Arts & Humanities as additionally insured for a minimum of $100,000 OR you must include an additional $10 fee to cover the insurance cost. Failure to include the proof of insurance or the $10 fee will result in your application being returned.

**Payment:**

Number of spaces **with** vendor provided insurance $100\_\_\_\_\_\_\_\_\_\_\_\_

Number of spaces **without** vendor provided insurance $110\_\_\_\_\_\_\_\_\_\_\_\_

There are NO refunds. This is a rain or shine event.

Credit Card Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Exp Date\_\_\_\_\_\_\_\_ CID#\_\_\_\_\_\_\_

Or Check #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I shall not hold Cape May MAC staff, volunteers or any of its representatives responsible for accidents to me, my staff, or property and I agree to assume all financial responsibility including but not limited to damages to property or injuries to person, which arise or are claimed to arise out of or in connection with my participation in the Halloween Crafts & Collectibles located at the Emlen Physick Estate.

I agree to comply with all applicable Federal, State and Local laws, rules and regulations while participating in the Halloween Crafts & Collectibles Show.

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I have read all the rules and regulations of Halloween Crafts & Collectibles and agree to abide by them.

Vendor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RETURN FORMS TO: Janice Corkery [jcorkery@capemaymac.org](mailto:jcorkery@capemaymac.org)

Cape May MAC

Po Box 340

Cape May, NJ 08204

Contact phone number: 609-224-6027