

Office Use Only

Birdville High School PTSA
17th Annual Craft Show
October 17, 2015 -- 9:00AM – 5:00PM

Office use Only
Date Rec'd _____
Check # _____
Amount _____

Application Due No Later Than September 30, 2015

Name:		
Company Name:		
Address:		
City:	State:	Zip:
Phone:	Email:	
Type of Craft:		
(Please be very specific. Note: Please include a picture of your booth showing items to be sold.)		
Specific booth numbers cannot be guaranteed, but all preferences will be honored to the best of our ability. Booths will be assigned on a first come, first serve basis. Please check for email correspondence.		
Booth Location Preference – please indicate #1 for First Choice and #2 for Second Choice:		
Large Gym ____	Small Gym ____	Main Hall ____ Cafeteria ____
How many booths do you need? _____ <small>booth size 10w x 8d</small>	Do you need electricity? _____ <small>Vendor MUST provide orange extension cord</small>	Yes ____ No ____
Amount enclosed: \$ _____ \$70.00 per booth -- \$10.00 extra per booth if requesting electricity		

Please make checks payable to: **Birdville High School PTSA.**

Check will be deposited upon receipt. Booth fees are fully refundable through August 15. Fees are 50% refundable through August 31. Vendors with returned check will be charged our bank fee.

Mail your form and check to the address below:

Tracey Mutz
2716 Steeplechase Court
Hurst, TX 76054

Email is the best way to contact us:

Birdvilleptsa@gmail.com

For up-to-date info, please go to the website at:

<http://schools.birdvilleschools.net/Domain/197>

Or visit us on our Facebook Page:

<https://www.facebook.com/BHSPTSCraft>

By signing below, I hereby release and agree to hold harmless Birdville ISD, Birdville High School, its Staff & PTSA Board and PTSA Members from all responsibility and liability in case of injury, accident, civil dispute, theft or damage of merchandise or personal property for the weekend of October 17, 2015. I also authorize the release of my information for public viewing and advertising in print and on the website.

Signature _____

Date _____

Please keep a copy of this form for your records