



2018
Our Town Craft Fair
Whitewright, TX



Vendor Application
 www.whitewright.org

Contact Name: _____ Business Name: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Phone: _____ Email: _____ Tax ID #: _____
 (All Vendors must provide a Tax ID #)

Arts & Craft Vendors

10 x 10 Spaces = \$50

of spaces: _____ Check or MO #: _____

List items being sold _____

(All vendors must have handmade or home crafted items)

Food Vendors

10 x 10 spaces or Food Truck = \$100

of spaces: _____ Check or MO#: _____

List food items: _____

Let us know how you heard about our craft fair:

Chamber website Returning Vendor Word of Mouth Flier Other

I have completely read and understand the rules and regulations in the application for vendor space in The Whitewright Area Chamber of Commerce's Our Town Craft Fair. I agree to adhere to the rules and regulations with the understanding that my failure to do so will forfeit my right to exhibit. I further understand that there will be no refunds or roll-over fees issued.

Signed: _____ Dated: _____

Mail Application with Fees to: Whitewright Area Chamber of Commerce
 P.O. Box 189
 Whitewright, TX 75491