



18th BROCKPORT ARTS FESTIVAL EXHIBITOR APPLICATION

DEADLINE JUNE 30, 2012



Please complete the entire form (2 pages) and mail with your check to:
BISCO, BAF Coordinating Committee
P.O. Box 197, Brockport, NY 14420

For further information or questions, please e-mail brockportartsfest@frontier.com

Go to BrockportArtsFestival.com or call 585.395.9606

PERSONAL/BUSINESS INFORMATION:

Please print/write clearly.

CONTACT'S NAME: *(last)* _____
(first) _____

BUS. NAME: _____

MAILING ADDRESS: _____

Give address where we can reach you quickest. _____ ZIP _____

E-MAIL ADDRESS: _____

PHONE NUMBER: _____

WEB SITE: _____

SINGLE Space: ____ (\$375) DOUBLE Space: ____ (\$575)

Note: Single spaces are preferred; double spaces limited.

NOTE: This application is for exhibitors who are promoting their business/organization and wish to make contacts for offsite sales of goods or services

BRIEFLY describe the nature of your exhibit/business unless obvious by its name.

Check: *Booth* _____ OR *Trailer* _____ (length) _____. Over 24 feet may incur an additional charge.

FESTIVAL INFORMATION:

- Date: August 11-12, 2012
- Time: Sat. 10-6, Sun. 10-5
- Location: Main Street, Brockport, NY
- Booth spaces 11-12 ft. wide to fit 10' square booths
- Special Requests – List and Explain as needed:

CONSIDER BECOMING A FESTIVAL SPONSOR (more detail on website)

\$1000 Level – Free single booth, logo on our website, T-shirt, in festival insert,

\$1500 Level – Free double booth, all of above plus logo on Poster, plus

Sponsorships may be in kind services or used to support a particular festival activity.

I have read this application, including the rules and regulation page, and agree to all terms and conditions described.

SIGNATURE: _____ DATE: _____

Please fully complete this form (this page and check list page 2) – may print back to back.

FOR FESTIVAL USE ONLY: DATE APPLICATION RECEIVED: _____ FEE _____

BOOTH # _____ DATE: ACCEPTED: _____ DENIED: _____

