

Vendor/Craft Show Registration Form



Sunday, November 11, 2018, 12:00 – 6:00 p.m. in the School Gymnasium

Name and Address: _____

Phone: _____ Email address: _____

Please give a brief description of what you will be selling: _____

- Cost of each table will be \$20.00. Table and chair are provided.
- Each vendor/crafter is asked to donate an item for our raffle (approx. \$20 retail value).
- Please make check payable to St John the Baptist Church.
- Mail check and signed registration to:

Pam Reiter
9794 Howard Rd
Harrison, OH 45030
(513-738-1710)

Guidelines and Waiver

1. Set up will be at least 1 hour before start of the show. Set up on Saturday will be available.
2. Vendors can not share spaces. One vendor per registration please.
3. Your space needs to be cleaned of all trash and spills before leaving.
4. Children in attendance need to be respectful of other vendors/crafters. No playing or excessive noise.
5. Payment is due with registration to reserve your space, prior to the day of the show.
6. Signature is required on registration form (see waiver below).

Registration and fee are due back no later than October 20th, to assure your space. **Fees are non-refundable.**
You will be sent a confirmation of receipt by email.

Waiver: I, the undersigned, will participate in the activity described on the Activity Information form and release from all liability and indemnify the Archbishop of Cincinnati (“the Archbishop”), both individually and as trustee for the Archdiocese of Cincinnati and all parishes and schools within the Archdiocese (the “Archdiocese”), agents, representatives, volunteers, and employees of the Archdiocese, from any and all liability, claims, judgments, cost and expenses, including attorneys’ fees, arising out of any injury or illness incurred by me while participating in or traveling to or from the activity and further agree not to bring or prosecute or allow to be brought or prosecuted (including but not limited to prosecution through subrogation) in my name, any claims, lawsuits or actions against the Archbishop, and the officers, agents, representatives, volunteers and employees of the Archdiocese. I also understand that my registration fee is non-refundable.

Applicant’s Signature: _____ Date: _____