



# Spring Craft & Vendor Fair

**Instrumental Parents Association**

Saturday, March 23rd, 2019 - 10am to 3pm

North Hills Middle School Gymnasiums



## VENDOR AGREEMENT

- > Spaces are reserved first come, first serve, upon receiving full payment. Payment & Application must be submitted together by FEBRUARY 28th, 2019. SPACES ARE LIMITED!!
- > Limited spaces with Electricity are available. Applicant must provide their own power strip & extension cord. No extension cords are permitted to be set up in front of the table.
- > Nothing is permitted to be set-up in front of your table or within the walk-ways.
- > One Chair is provided for each Vendor, regardless of the number of spaces reserved.
- > Doors open to Vendors at 8:00am. Tables & products should be set-up for sales by 10am, remaining until 3pm. There are to be no early take-downs & departures.
- > The NHIPA & NHSD can not be held responsible for damages, injuries or loss caused to you, your vehicle, your products or any of your private belongings.
- > Vendors are responsible for their own Sales Tax collection and ability to make change.
- > The NHIPA will be selling concessions and baked goods.
- > All Vendors are asked to donate one (1) item to the NHIPA Vendor Prize Raffle.

Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Item(s) Selling: \_\_\_\_\_

\_\_\_\_\_ Number of Spaces w/ 6-ft Table Rented from NHIPA = \$35 \$ \_\_\_\_\_

\_\_\_\_\_ Number of Spaces, Bringing Your Own 6-ft Table = \$25 \$ \_\_\_\_\_

\_\_\_\_\_ Request Electric, at an Additional \$5 \$ \_\_\_\_\_

**TOTAL DUE - Payable to NHIPA \$ \_\_\_\_\_**

By signing below, I acknowledge that I have read and agree to follow the above Vendor Agreement. I also understand that there are **NO REFUNDS** of any kind, or under any conditions.

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

Please mail this application, along with your check made payable to NHIPA, no later than February 28th:

**NHIPA Vendor Fair ~ c/o Monica Anderson ~ 16 Richland Avenue ~ Pittsburgh, PA 15229**

For any questions, e-mail: [Mo.NhipaVendorSale@gmail.com](mailto:Mo.NhipaVendorSale@gmail.com)

**NHIPA Use Only:** Number: \_\_\_\_\_ Date Received: \_\_\_\_\_ Payment: \_\_\_\_\_ Ck#: \_\_\_\_\_