

Be sure to review the policies & guidelines
Booth Tables need to be covered to the floor

Please Return This Page

20 _____

Please Print

(What year?)

Booth Space _____

Home, Bus, Org _____

Retail _____

Name: _____

Organization or Business Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Please write a description of your craft(s). Be specific – but brief with maximum of 200 spaces and characters including name and location. If you wish to have the same ad as last year, just write SAME.

I understand that the “Christmas Around Sabina Town” Committee, and any person acting on their behalf, will not be responsible for any art or craft work displayed that may be lost or damaged or any personal injury of any kind, during the show. **Remember your booth tables need to be covered to the floor. My signature below confirms that I have reviewed the Policies and Guidelines and agree to abide by them.**

Signed: _____ Date: _____

Please make checks or money order payable to C.A.S.T.

Payment enclosed is: \$ _____ registration

Mail to: Christmas Around Sabina Town

\$ _____ Raffle (\$20)

P O Box 2

\$ _____ Snowman deposit

Sabina, OH 45169

(\$20) if applicable

Cash _____

Check # _____