

# Upper Dublin Township Department of Parks & Recreation

## CRAFT FAIR

Saturday, March 3, 2012  
10:00 AM - 3:00 PM

**LOCATION: Upper Dublin Township Building**  
801 Loch Alsh Ave., Fort Washington, PA 19034

Resident Vendor Fee: \$25.00 per table  
Non-Resident Vendor Fee: \$30.00 per space

Indoor accommodations are available for approximately 40 vendors. Reservations are on a "first come, first served" basis. Your reservation is held by your payment. **NO RESERVATIONS** will be accepted without payment.

**SPACE dimensions include (1) 6 foot table and 2 chairs** and will be located in the Upper Dublin Township Building Community Room. Electricity and internet are available to a limited number of vendors (please indicate any special requests on registration form.) **\*\*Friday evening set-up available\*\* Vendors can set-up on Friday, March 2<sup>nd</sup> from 1-5 pm.** Saturday setup will begin at 7:30 AM. Vendors must supply their change.

Cash, check, or credit card payment will be accepted. Please make checks payable to "Upper Dublin Township". Please detach and mail registration form with payment to:

**Upper Dublin Township  
Department of Parks & Recreation  
801 Loch Alsh Avenue  
Fort Washington, PA 19034**

**\*\*SORRY...NO REFUND AFTER FEE IS PAID\*\***

If you have any questions, please call UDP&R at (215) 643-1600 ext. 3443.

### UDP&R 2011 SPRING PROGRAM REGISTRATION

Participant Name: \_\_\_\_\_ Phone (H): ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ [ ] Upper Dublin Resident [ ] Non-Resident  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

Program Name	Day/Dates	Time	Fee
Craft Fair	Sa 3/3	10 a - 3 p	\$
Electricity	Circle one: Y or N		n/c
Internet	Circle one: Y or N		n/c
Special requests:			
ITEMS TO BE SOLD			

PAYMENT METHOD: Payor Name: \_\_\_\_\_

[ ] Check # \_\_\_\_\_ [ ] Cash

Credit Card: [ ] Visa [ ] MasterCard [ ] Discover [ ] MAC

Card # \_\_\_\_\_

Exp. date: \_\_\_\_ / \_\_\_\_

Name on card (please print)

Total Payment: \$ \_\_\_\_\_

#### FOR OFFICE USE ONLY:

Date \_\_\_\_\_ Initials \_\_\_\_\_ Receipt # \_\_\_\_\_

Date \_\_\_\_\_ RecWare \_\_\_\_\_

Date \_\_\_\_\_ Verified by \_\_\_\_\_

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_