



2024 Sorooptimist "Spring Daze Craft, Garden & Gift Show" Saturday 5/4 (9am-5pm), Sunday 5/5 (10:00-4pm)



VENDOR APPLICATION
Application deadline for vendors: 4/26/24
Applications received after deadline will be processed on space available basis.

Please complete all information. Incomplete applications will be returned for clarification. Please keep a copy of your application for your records. Management reserves the right to limit "like kind" vendors. THIS IS A JURIED SHOW. PLEASE PRINT OR TYPE CLEARLY.
Mail application with your check or money order to:
SIPO, Attn: Sharron King, PO Box 617, Manchester, WA 98353

Booth Name: _____

Authorized Representative: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Home Phone: _____

UBI# _____ Mobile: _____

If you are not registered, please contact WSDR at (360) 705-6741

Email Address: _____

Do you have a website? NO ____ YES ____ (web address) www: _____

REQUIREMENTS FOR THIS EVENT (You will receive your booth assignment/packet when you arrive)**
Booth Size ____10'x10' **ONLY Prime Hallway is available - \$150**

AMENITIES REQUESTED: (Vendor is responsible for all equipment)

- Power - Outlets are available on a first come basis with a paid application. You must provide your own 50' grounded three prong extension cord.
- Table-\$10.00 (1 per vendor) - Very limited 6' tables are available and will be provided on a first come basis with a paid application.

Spring Daze Management reserves the right to make changes in booth location, size and display limits; you will be notified.

SET UP TIME: Friday-5/3 from 5-9PM; Saturday-5/4 from 6-9:00 AM. All vendor vehicles MUST BE moved by 9:00 AM. Please park in spaces farthest from the building at the east end of the mall to allow for customer parking.

TEAR DOWN TIME: No vendor shall tear down their booth prior to the closing of the event at 4 PM on Sunday.

FOOD VENDORS: Applications will be accepted from food vendors selling pre-packaged baked goods or food, etc.

CANCELLATIONS: Any cancellation is subject to a \$25 handling charge PRIOR TO 4/26/24. There will be no refunds after the 4/26/24 cancellation date.

TOWN SQUARE has restaurants available for food service.

Raffle Item: Soroptimist will be holding a raffle and would appreciate each vendor donating a raffle item.

INSURANCE: Vendor Applicants for food item (must be packaged) and/or skin care products sales or distribution must provide a certificate of insurance covering their participation at this Event in an amount not less than \$1,000,000 liability and \$1,000,000 bodily injury naming Soroptimist International of Port Orchard and SK Towne Square as additional insured.

HOLD HARMLESS DISCLAIMER: Soroptimist International of Port Orchard and Town Square Mall will not be responsible for loss or damage to any property (vehicle or booth). Accordingly, each vendor shall take all necessary precautions to protect property and valuables. The event facility is a secured building.

APPLICANT: (PLEASE COMPLETE THE FOLLOWING) Fully describe a complete listing of the products you intend to sell or display. Note that changes or additions to this statement, after submission, must be approved by the Soroptimist International of Port Orchard Spring Daze Committee. This listing helps us reduce over-saturation of the market area. If you do not enclose a product list, the application will be considered incomplete and will be returned to you. **WE DO GRANT EXCLUSIVITY FOR ANY COMMERCIAL PRODUCTS .** Please don't assume we know what you sell. **If your product is not listed here (including brand names) YOU WILL NOT BE ALLOWED TO SELL/DISPLAY IT.** Attach a separate sheet if necessary. Please include pictures of your product with your application. Thank you!

By signing this application, I/We agree to abide by all the rules and regulations and comply with all State and Kitsap County Regulations, including securing any required Health District permits for operation. I have read and agree to all the "Requirements for this Event."

Signature _____ **Date** _____

INFORMATION
Sharron King, Email: kingcreations@wavecable.com, Phone: (360) 871-1805
www.siportorchard.com
Mail: PO Box 617, Manchester, WA 98353