2022 Nautical City Festival, Inc.

P.O. Box 55 Rogers City, MI. 49779 989-734-4656 rogerscityncf@gmail.	il.com
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## 2022 Juried Arts & Crafts Show August 5<sup>th</sup>, 6<sup>th</sup>, & 7<sup>th</sup>, 2022

Name:						
Address:						
City:		_State:	Zip:			
Home Phone:	me Phone:Business Phone:					
Vehicle License Plate						
E-Mail:		PLEASE PRINT NEATLY				
Description of Mercha	ndise:					
**If you were	e in the show last	t year, you are	not required to subm	it photos**		
Submit 5 (five) photos o working on your work-in p during the first hour of t refund will be given. The p Spaces are 10ft deep x Space rentals are \$100 How many spaces o	rogress, & one of yo <b>he show.</b> If your ite photos I am submitte 15ft across <b>.00</b> per space for th	our supplies and oms are found to l ing are represent ne entire show <b>(3</b>	tools. <b>The show will als</b> be not <u>made</u> , you will be	<b>o JURY Friday</b> asked to leave and no bring.		
Amount paid: \$	Due: \$	Cash \$	Check #	Date		
Make checks payable to: Nautical City Festival, Inc.						
Remit application to	p: P.O. Box 55,	Rogers City, N	11. 49779			

Nautical City Festival email: rogerscityncf@gmail.com

## Free camping available to 'self-contained' units

I, undersigned, have read the regulations for the participation in the arts & crafts show And agree to participate according to these regulations. I agree to hold harmless the Nautical City Festival from any damage to my property or any personal injury in which myself or helpers may sustain while participating in the Nautical City Festival on August 5<sup>th</sup>, 6<sup>th</sup>, & 7<sup>th</sup>, 2022. I understand that I will be held responsible for any damage my exhibit may cause the courthouse lawn and/or underground sprinkler system. I further understand that I am responsible for my space, materials and for all insurance during my attendance at the Nautical City Festival. The photos I am submitting are representative of the work I plan to bring. If they are not, I may be asked to leave with no refund given.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

If you have any questions, please call the office and we'll be happy to help you in any way we can. 989-734-4656.