



Salamanca Area Chamber of Commerce
33rd Falling Leaves Festival
October 1-3, 2010



ART & CRAFT VENDOR APPLICATION

Please note that incomplete applications will be returned, please print clearly.

Last Name: _____ First Name: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work/Cell Phone: _____

E-mail: _____ Web Site: _____

New York State Tax Number: _____ Ware: _____

Craft sites are \$75 for the for the 2+ day event. Area sizes are 10' x 10'.

Electric needed? (Please indicate how much) Yes _____ No _____

Please circle one: Single Space Double Space

I acknowledge that I have read the application and agree to abide by the enclosed rules and regulations governed by the Salamanca Area Chamber of Commerce (SACC). I understand that if I have misrepresented my merchandise or violate any rules and regulations, SACC reserves all rights of cancellation and disqualification without refund. I release the SACC from all responsibility for installing, protecting, selling, storing and removing my exhibit and merchandise. The SACC is not responsible for any items, property loss or damage.

Signature: _____ Date: _____

Please make check payable and mail to:

**Salamanca Area Chamber of Commerce
26 Main Street
Salamanca, New York 14779**

If you have any questions or need more information, please contact Jenny Ingrao, Events Specialist, at 716-945-2034, jenny@salamancachamber.org.