

# QUAIL HOLLOW CRAFT AND HERB FAIR May 1st and 2nd 2010 APPLICATION

PLEASE TYPE OR PRINT LEGIBLY

Exhibitor Name: \_\_\_\_\_

Business Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**VENDOR LICENSE NUMBER:** \_\_\_\_\_

Location Preference:

- Main Floor\* (\$80.00)
- 2<sup>nd</sup> Floor (\$65.00)
- Outside (\$65.00)
  - Electricity needed  
(4 available)

Comments:

\* Indicate 2<sup>nd</sup> choice in the comment box with main floor preference since main floor fills up quickly. If you would rather NOT be in the show if main floor is unavailable, check this box:

Backdrops No  Yes  Size and material \_\_\_\_\_

Describe items to be sold. If same as previous year's, check box

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Quantity of Fliers Desired: \_\_\_\_\_ Fliers will be mailed the first week in April. **Max of 25.** Feel free to photocopy.

Amount Enclosed: \_\_\_\_\_ **Make checks payable to QUAIL HOLLOW VOLUNTEER ASSOCIATION**

**Return to: Craft Fair Application  
Quail Hollow State Park  
13480 Congress Lake Avenue  
Hartville, Ohio 44632**

**Payment MUST accompany the following:**

- Completed application**  **Liability Waiver**  **At least 2 photographs**  **Check or money order**

-----For Committee use only -----

Check #: \_\_\_\_\_

Confirmation Sent: \_\_\_\_\_

Amount Received: \_\_\_\_\_

Photos Received: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Photos Returned: \_\_\_\_\_

# QUAIL HOLLOW CRAFT & HERB FAIR

Hartville, Ohio

## WAIVER

I, INTENDING TO BE LEGALLY BOUND, HEREBY, FOR MYSELF, MY HEIRS, EXECUTORS AND ADMINISTRATORS, VOLUNTARILY ASSUME ALL RISKS OF ACCIDENT OR INJURY AND RELEASE AND FOREVER DISCHARGE THE STATE OF OHIO, OHIO DEPARTMENT OF NATURAL RESOURCES, AND IT'S EMPLOYEES, OFFICERS AND AGENTS, FROM ANY AND ALL LIABILITY FOR PERSONAL INJURY OR PROPERTY DAMAGE OF ANY KIND SUSTAINED ON THE QUAIL HOLLOW STATE PARK PROPERTY DURING THE QUAIL HOLLOW CRAFT & HERB FAIR HELD ON MAY 1 & 2, 2010 WHETHER SUCH PERSONAL INJURY OR PROPERTY DAMAGE IS CAUSED BY THE NEGLIGENCE OF THE STATE OF OHIO, OHIO DEPARTMENT OF NATURAL RESOURCES, OR IT'S EMPLOYEES, OFFICERS, AGENTS, OR OTHERWISE.

I FURTHER AGREE TO HOLD HARMLESS THE STATE OF OHIO, AND THE DEPARTMENT OF NATURAL RESOURCES, IT'S EMPLOYEES, OFFICERS AND AGENTS, FROM ALL LOSS AND EXPENSE, INCLUDING BUT NOT LIMITED TO, DAMAGES, LEGAL EXPENSE AND COST OF DEFENSE, IN ANY MANNER ARISING FROM MY USE OF THE STATE PARK.

PARTICIPANT SIGNATURE \_\_\_\_\_

PARTICIPANT (NAME PRINTED)\_\_\_\_\_ DATE\_\_\_\_\_

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## SHOW GUIDELINE AGREEMENT

I have hereby read the above QUAIL HOLLOW CRAFT & HERB FAIR guidelines and agree to abide by them to make the event a success for all participating artisans and the general public.

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