

## Most Precious Blood Rosary Society Annual Christmas Boutique/Craft Show

Saturday, November 3, 2018 8:30 a.m.-3:00 p.m.

Most Precious Blood School gym, 1515 Barthold St. 46808

The PB Rosary Society is currently accepting table rental applications for this year's  
Craft show.

Rental fee is \$25.00 for an 8 ft. standard size table.

Rental space is available for homemade crafts and home based businesses, such as  
Avon, Pampered Chef, etc. No retail stores permitted.

We are wheelchair accessible!

Food will be available for purchase throughout the sale.

Vendors are eligible for the door prizes drawings held every half hour.

Vendors may donate an item from their table towards our raffle which is held at  
3:00. Your donated items will be placed on display on the stage, along with your  
table number.

### Guidelines:

- \* You may bring your own table/displays but they may not exceed the 8 foot rental space. Please inform us if you are bringing your own tables or displays.
- \* Table coverings or skirting are required on all tables.
- \* Tables may not be moved. They have been placed to utilize the best layout of our gym.

\* Vendors may rent up to three, 8 ft. tables. However, space may not be extended with card tables or any other means into other vendor areas or walkways.

\* Spaces are assigned on a strictly first paid basis, if you desire a specific location, please reserve EARLY. No refunds or cancellations after **October 25, 2018.**

\* Vendors may only sell crafts/products at their table. Any flyers or business cards must remain at your table for customers to pick up if they choose. You may not solicit outside of your table area.

\* All vendors should handle their sale transactions in their own area. We are unable to provide change.

\* Please do not tear down before 3:00 without prior approval.

If you have questions, would like more information or would like the following forms mailed to you, call Teresa at 260-426-1728.

The Fort Wayne/South Bend diocese requires all individuals using our parish premises to provide the parish with a certificate of insurance naming the parish and the diocese as the additional insured. However, due to the size of the craft show, we will not require a certificate of insurance from each vendor. Instead you will need to fill out the form "Adult Hold Harmless/Indemnity Agreement" and return it with your application form. If you do not return a copy of this form, you will not be permitted to participate in the boutique.

## Most Precious Blood Rosary Society Annual Christmas Boutique

### Table Rental Application

(Make checks payable to **Most Precious Blood Rosary Society**)

Name: \_\_\_\_\_ Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Email Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of craft: \_\_\_\_\_

If you are unable to attend and have a friend working your table, please inform us if they are going to be showing crafts other than what you stated above.

\_\_\_\_\_ Number of tables(spaces) at \$25.00 each \_\_\_\_\_ electricity \$5.00

Wall space is limited. Please mark your first and second choice.

Along wall \_\_\_\_\_ center floor \_\_\_\_\_ no preference \_\_\_\_\_

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### ADULT HOLD HARMLESS/INDEMNITY AGREEMENT

The above named **CRAFTER** agrees to defend, protect, indemnify and hold harmless **MOST PRECIOUS BLOOD PARISH** against and from all claims arising from the negligence or fault of the above named **CRAFTER** which arise out of the craft show.

Additionally, the above named **CRAFTER** agrees to protect defend, hold harmless and fully indemnify **MOST PRECIOUS BLOOD PARISH** for any claim or cause of action whatsoever arising out of the **CRAFT SHOW** which takes place **Nov. 2** (set up) & **Nov. 3** (sale), **2018** that is brought against **MOST PRECIOUS BLOOD PARISH** by the above named **CRAFTER** or their family members whether such claim arises from the alleged negligence of **MOST PRECIOUS BLOOD**, its employees or agents or **CRAFTER** negligence. If any portion of this agreement is held invalid, it is agreed that the balance thereof, shall continue in full legal force and effect.

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

Name (Please print) \_\_\_\_\_ Date: \_\_\_\_\_

Please return forms and payment to Carol Flaugh, 2802 Windrush Dr., Fort Wayne, IN 46808.