

DePasquale Shows www.depasqualeshows.com
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Saturday September 11

Hand Crafted Jewelry and Fashion Accessories

Bridgehampton Community House

limited to 40 tables

all indoor event with free admission

Rt. 27, Bridgehampton, NY

10am - 8pm

() \$150.00 per 6' table (included).

All spaces 8' long and include (1) 6' table.

Indicate # of tables reserved.

Return application with payment.

Include photo of your work if first time exhibiting with us.

Set-up begins 8am Saturday.

Complementary refreshments served to all exhibitors.

TERMS OF EXHIBITION

Tables and chairs provided.

All exhibitors must have a NY State resale tax number.

No space reserved without signed application and full payment.

No checks accepted within 14 days of the fair. **\$25 fee for bounced checks.**

All items sold must be listed and approved by management.

DePasquale Enterprises reserves the right to accept or refuse exhibitor participation.

We reserve the right to remove items from booth that are not listed.

All exhibitors are responsible for leaving their area clean.

Merchandise must be priced and honestly represented.

In the event of show cancellation due to weather there will be no refunds.

Absolutely no packing prior to close of the fair (8pm).

Assigned space will not be held for exhibitors arriving after 9am.

No refunds

Fair Hours 10am – 8pm.

Set-up time 8am.

Confirmations detailing setup will be mailed or emailed prior to each event.

Hampton Application 2010

Name _____

Business _____

Name _____

Address _____

City _____ State _____ Zip _____

Tel _____ Cell _____

Fax _____ Tax ID # _____

Email _____

Website _____

Vehicle _____

make/model _____

License _____

plate# _____

() Fine Art () Photography () Mixed Media

() Fiber/Wearable Art () Jewelry () Pottery

() Glass () Wood () Metal () Leather

Describe all items to be sold (use reserve side in needed)

Enclose full payment with application.

Checks payable to: DePasquale Enterprises

Mail to: PO Box 278, Selden, NY 11784 Or Fax 631 285 1511

MasterCard or Visa Only

Card# _____

Exp date _____ Security Code _____

Amount to charge: _____

Billing Address (if different) _____

Signature of cardholder _____

Check/ Money order total enclosed _____

My signature indicates that I am in agreement with the above terms of exhibition. It is further agreed that all vendors are independent agents and that neither DePasquale Enterprises nor owner of the premises will be held responsible for injury, loss or damage of any kind whatsoever.

SIGNATURE _____

DATE _____