



20th ANNUAL CRAFT BOUTIQUE

Dear Crafters:

Planning has begun on our 20th **ANNUAL** craft boutique. Boutique dates and hours will be:

*Saturday, November 20, 2010: Sale 9 a.m. - 4 p.m.

*Sunday, November 21, 2010: Sale 9 a.m. - 2 p.m.

SET UP TIME: Friday, November 19, 2010 from 6pm to 8pm
Saturday, November 20, 2010 from 7:00 a.m. to 9:00 a.m.
The school and sale location is 506 Jackson St., Anoka, MN 55303

RETURNING CRAFTERS: TO RESERVE YOUR SAME SPACE, YOUR REGISTRATION FORM MUST BE RETURNED BY JULY 31, 2010. ALL SPACES AFTER THIS DATE WILL BE ASSIGNED ON A FIRST REQUEST BASIS.

GUIDELINES FOR CRAFTERS

Rented spaces are 8' wide with a 5' depth. Table rentals are filled on a first request basis. These spaces are well marked and all displays and sale items must be fully inside the designated space at all times for the safety of everyone—crafters, volunteers and guests. Two chairs are provided with each space. No unrented tables will be allowed next to your rented space or blocking any isles or fire exits. The Committee reserves the right to charge for additional space used.

Storage of items is not allowed beyond your marked spot. In this space, you will need to have your seating arrangements within the depth area or behind the table. All storage, sale items and exhibitor seating must be within the assigned space.

Handcrafted items will be the ONLY items permitted for sale or on display by the crafters. Any crafter selling items that are not handcrafted may be asked to leave. Products such as Tupperware, Discovery Toys, Beanie Babies, etc. may not be sold. We also ask that no baked goods be sold. **No soliciting** will be allowed in or on the school grounds.

Staff your space during all hours of the show. DO NOT PACK UP YOUR ITEMS PRIOR TO 4:00 P.M. SATURDAY AND 2:00 P.M. SUNDAY. This allows a quality show worthy of our 20-year effort.

--Security is on the premises both Saturday and Sunday from start to finish.

--**Confirmation notices with your space number(s) will be SENT IN EARLY OCTOBER BY MAIL or E-MAIL.**

-- We will be placing crafter exhibits in the school gym and school cafeteria in a similar configuration as past years. For the comfort of our guests and care of our school, we no longer exhibit in the hallway.

--There will be no alternative weekend plans in case of a storm.

--Only adults, 18 and older, who have signed the release of liability may be in a crafter space.

--**REMINDER:** This is a smoke free building. **SMOKING** is not allowed in or on the grounds of the building.

--**Please arrive 15 minutes before the sale begins and remain open until closing time both Saturday and Sunday.**

--Spaces will not be reserved until registration has been received with full payment.

--Cancellations will be accepted until October 1, 2010. After this date, there will be no refunds.

-- Each year we have a waiting list from approximately Sept. 15 until the show, with only a handful admitted.

To reserve a space, please completely fill out and return the enclosed registration form along with your check made payable to "St. Stephen's Craft Boutique" to the address below:

St. Stephen's School
506 Jackson Street
Anoka, MN 55303
Attn: Jody Hinkle

Checks will be returned to crafters we are unable to accommodate.

Should you have any questions, please feel free to call me 763-421-6383 or email jodyhinkle@gmail.com. We look forward to seeing you! Jody Hinkle and the St. Stephen School Craft Boutique committee

THESE GUIDELINES INCLUDE IMPORTANT INFORMATION FOR THE WEEKEND OF THE BOUTIQUE. THEY NEED TO BE KEPT FOR REFERENCE.



20th Annual St. Stephen's School
Craft Boutique
2010 Registration Form

Name: _____ Phone: _____

Work Phone: _____ Cell Phone: _____

Street Address: _____

CITY _____ STATE _____ ZIP: _____

e-mail: _____ Website: _____

2009 exhibitor, would you like the same space?: Yes
No, I would prefer _____

Are you new to the St. Stephen's Craft Boutique?:	
Yes	No

NUMBER OF SPACES NEEDED: _____

_____ UPPER LEVEL WITHOUT TABLE - \$60.00

_____ UPPER LEVEL WITH TABLE - \$65.00

_____ LOWER LEVEL WITHOUT TABLE - \$50.00

_____ LOWER LEVEL WITH TABLE - \$55.00

_____ If available, I would like a corner space – add \$5.00

_____ If available, I would like electricity -- add \$5.00

Total Submitted: _____

DESCRIPTION OF HANDMADE/HOMEMADE Crafts – All items must have a homemade component, no resale of wholesale items. Homemade food items must be pre-approved by the show director.

Description of exhibit _____

I have read and understand the "Guidelines for Crafters" and "Voluntary Release of Liability." I have signed the Voluntary Release of Liability on the back of this form.

Signed _____ Dated _____

Catholic Mutual . . . "CARES"

LIABILITY CONTROL VOLUNTARY RELEASE FORM

Assumption of Risk and Indemnity Agreement

Parish _____ Date _____

Description of Activity:

Each undersigned person requests and is granted permission to make use of the parish facility for the intended purpose described above.

In consideration of "permissive entry" to the facility, each of the undersigned, their personal representatives, heirs and assigns, DO HEREBY:

1. **RELEASE, DISCHARGE AND COVENANT NOT TO SUE** the above named parish and the Archdiocese of St. Paul/Minneapolis, MN for any and all claims and liability arising out of the strict liability or ordinary negligence of releasee or any other user of the facility which causes the undersigned injury, death or property damage and further agrees to hold releasee harmless and indemnify releasee from any claim, judgment or expense releasee may incur by participation in the described activity.
2. **UNDERSTAND** that participation in the described activity involves danger and risk of injury. The inherent danger is understood and voluntarily assumed.
3. **ACKNOWLEDGE** that the undersigned are aware of equipment and safety regulations and will comply with each regulation **ASSUMING ALL RISK** for themselves and all liability to others for failure to do so. No oral representations or inducements have been made to obtain signatures on this agreement. If any portion of this agreement is held invalid, it is agreed that the balance thereof shall continue in full legal force and effect.

I HAVE READ THIS DOCUMENT. I UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. I UNDERSTAND I ASSUME ALL RISK INHERENT IN THIS ACTIVITY. I VOLUNTARILY SIGN MY NAME EVIDENCING MY ACCEPTANCE OF THESE PROVISIONS.
