**ART-TIQUES VINTAGE MARKET**

 **(DBA Braselton Antique & Artisan Festival)**

 **Braselton Historical Gym**  **4825 Hwy 53 Braselton, Ga 30517 February 22, 23 & 24th 2019**

1. You will receive your booth assignment via email approximately 2 weeks prior to show.
2. Booths must be open and ready for the public at 11:30PM Friday, 8:30AM Saturday and 9:30AM Sunday. Booth must be attended by dealer or an authorized representative during all show hours. Dealers will not shut down until the show closes at 5:00PM on Sunday. Dealers will be responsible for removal of all trash from their booth space before vacating the premises.
3. Doors to facility will be locked and secured at the conclusion of show each night. Dealers accept full responsibility for all losses, damage, and injuries that may occur to themselves, associates, employees, guests, personal property, or inventory. Dealer releases the Braselton Antique Festival and JCPR, its officers and representatives (hereinafter referred to as BAF) from any liability and losses, damage or injuries.
4. Only items that are antique, vintage, collectible, handcrafted and are suitable to the character of the BAF will be permitted.

 The BAF reserves the right to refuse any merchandise deemed inappropriate for the festival.

1. The dealer expressly warrants that the goods sold to any purchaser are what the dealer represents they are. If the goods sold are not what the dealer represents they are, the dealer shall refund the full sales price to the purchaser. If any purchaser brings a lawsuit in law or equity against the BAF for any goods which are not what was represented at the sale through dealer's intentional gross negligence or negligent conduct, dealer hereby agrees to indemnify the BAF for any loss’ sustained by the BAF from said action and/or indemnification, including attorney's fees.
2. All dealer tables must be covered and booths must be neat in appearance and free of litter. Dealers will be responsible for their own sales, and collecting and reporting of sales tax.
3. No food or drink sales will be permitted other than by registered food vendors and the BAF.
4. No smoking within display / sale area. This is for the comfort of customers and surrounding dealers.
5. Dealers must stay within designated space. Exceeding outside of space will constitute in an additional rental fee unless approved by the BAF.
6. Return check fee of $35.00 applies. This is ***a RAIN OR SHINE SHOW***. Please prepare for both.

**I have read the festival policies and agree to the terms set forth above:**

**Your Name (**Please Print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**State\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_Telephones\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Type of Merchandise to be Offered \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please Enclose Payment to: Braselton Antique Festival, 115 Harrison St., Braselton, GA 30517 *Nonrefundable Total Payment Due with Registration***

 ***Festival Use Only: Please indicate .. INDOOR OR OUTDOOR BOOTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***\_\_\_\_\_\_* 20 x 10 booth $300.00 or \_\_\_\_\_\_\_\_ 10’ x 10’ Booths @ $175.00**

*Number Spaces\_\_\_\_\_\_Booths Assigned\_\_\_\_\_\_\_\_Payment Total\_\_\_\_\_\_\_\_Date Received\_\_\_\_\_\_\_ Form \_\_\_\_\_\_\_*