



Saturday, October 2, 2010

Artist Exhibitor Registration Form

Complete this form and send registration along with payment by August 31, 2010

Artist Information

Name:

Address:

City:

State:

Zip Code:

Email Address:

Website:

Phone

Description of Artwork and Crafts:

Booth Fees

Check the appropriate boxes. Note: Booth fees do not include table(s) and/or tents.

- 10' x 10' space (payment received by 08/31/2010) Cost: \$30.00
 10' x 10' space (payment received after 08/31/2010) Cost: \$40.00

Total \$ Enclosed: _____

Please make checks payable to Knollfest LLC. Send to Knollfest c/o Lade Akande, 5366 Clarendon Rd.
Indianapolis, IN 46208

My entry, booth fee, and check are enclosed. My signature below indicates that I accept the regulations regarding my participation in the Knollfest Art and Music Festival. I also understand that Knollfest will not be responsible for any loss or damage to my display or artwork, or for any injury that occurs in any way from my participation at the festival.

Printed Name:

Signature:

Date: