

# 21st ANNUAL POWHATAN SPRING ANTIQUE POWER SHOW

2455 Academy Road – Powhatan, VA

April 28<sup>th</sup> and 29<sup>th</sup>, 2018

www.powhatanpowershow.com

## CRAFT VENDOR REGISTRATION FORM

**Set Up Time:** Friday, April 27<sup>th</sup> after 12 noon or anytime BEFORE Gate opens to public at 9 am Saturday, April 28<sup>th</sup>.

**Vehicles:** Must be off the field by 9 am each day of event.

**You Provide:** Shelter, chair, tables.

**Spaces:** Are on a first come/first serve basis

**OBLIGATION: PLEASE DO NOT PULL UP AND LEAVE THE EVENT BEFORE IT IS OVER. STAY COMMITTED.**

**PLEASE NOTE:** This is a church sponsored event. We reserve the right to request that offensive or inappropriate material at vendor's booths be removed immediately. Non-compliance will result in dismissal from the premises.

**Security:** Security will be present throughout the grounds Friday and Saturday night.

**RAIN OR SHINE:** This is a rain or shine event. NO REFUNDS.

**REGISTRATION DEADLINE:** April 25<sup>th</sup>.

**Payment Due with Registration Form.**

**Checks made Payable to:**

Powhatan Power Show

**MAIL FORM AND CHECK TO:**

Coalition of Powhatan Churches  
3895 Little Fighting Creek Rd , Powhatan, VA 23139

**ALL PROCEEDS WILL GO TOWARDS  
BUILDING A COMMUNITY FOOD PANTRY**

**We hope you will enjoy helping us!!**

The Coalition of Powhatan Churches Mission Statement:

***Lending Hearts and Hands to our***

**Community**

**FOR MORE INFORMATION CALL:**

Jan Priddy – 804-598-0093 (please leave message) or - Email: janpriddyart@verizon.net

Please tear off and send with check to Coalition of Powhatan Churches, 3895 Little Fighting Creek Road, Powhatan, Va 23139.

**Spaces are 15' x 15' – \$25.00 for 1 day ---- \$40.00 for two days Mark the appropriate boxes:**

Saturday, April 28<sup>th</sup>  Sunday, April 29<sup>th</sup>  or Both Days  Amount Enclosed: \_\_\_\_\_

**AFTER THE DEADLINE OF APRIL 15<sup>TH</sup> SPACES ARE \$35.00 FOR 1 DAY AND 50.00 FOR 2 DAYS.**

NAME: \_\_\_\_\_

NATURE OF ITEMS TO BE SOLD: \_\_\_\_\_

BUSINESS NAME (if applicable) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

\*\*Your business name and description of product will be listed in the program booklet if we receive it in time.)

***DONATIONS TO OUR SILENT AUCTION WOULD BE GREATLY APPRECIATED***