



17th Annual Weave the Web

An Intuitive, Healing, and Creative Arts Fair

Saturday, September 29th, 2018
11:00 am - 5:00 pm

Please read carefully and sign this agreement below

1. I agree to be respectful of Crystal Visions and its properties. We consider Crystal Visions to be Sacred Space. Please leave it in a condition as good as or better than you found it.
2. Booth spaces are approximately **10 x 10** for vendors selling products/or services. ***You are responsible for all your own set up, so please bring chairs; table; canopy etc.***
Readers need to bring their own table. Two chairs will be provided for each reader. A limited number of umbrellas are available for readers for an additional \$10.
3. I agree to be respectful of my neighbors and all those in attendance.
4. Crystal Visions reserves the right to limit activities of participants and to discern that products and services offered are in alignment with our intentions for the day.
5. I agree to the "honor system" and will pay accordingly. Booth/space cost is **\$20 non-refundable fee** to register and **25% of all income received payable in cash** for your products and/or services. A designated representative of Crystal Visions will collect the 25% at the end of the day.
6. I agree to occupy my booth/space for the entire time of the fair. NO EARLY BREAKDOWNS.
7. I agree to be on the grounds at Crystal Visions and setting up no later than 10:00 or I will forfeit my space. **Set up time starts at 9:00 am on September 29th.**

Attach the \$20 fee (cash or check) to this form and mail to Crystal Visions, PO Box 8, Naples, NC 28760.

For more information call **828-687-1193** or email **events@crystalvisionsbooks.com** or visit

www.crystalvisionsbooks.com

Signed _____ **Date** _____

"PLEASE PRINT CLEARLY"

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Email _____ Web Site _____

Products/services offered _____

Will you be using a tent? (*this helps us in the fair layout*) _____ Yes _____ No

Item donated for raffle, if you wish: _____

CRYSTAL VISIONS INFO ONLY:

Date received: _____ By: _____ check number _____ or cash _____

Registration Fee \$20 Limited Umbrellas for Readers \$10 Total Amount: _____