

Arkansas Craft Guild's
39th Annual Christmas Showcase
December 1, 2 and 3, 2017
Statehouse Convention Center, Little Rock, Arkansas

APPLICATION FORM

This is a juried show. All work must be original - designed and crafted by the artist who must be present at the show. Arkansas Craft Guild Members and returning Christmas Showcase guest artists do not need to jury for this show.

NEW APPLICANTS: Must submit 5 images of your work and one of your booth display on a CD and send with your completed application and a \$15.00 nonrefundable jury fee to Arkansas Craft Guild Christmas Showcase, P. O. Box 800, Mtn. View, Arkansas 72560. If you prefer, you may submit your work and booth images separately, via email to arkansascraftguild@gmail.com with CHRISTMAS SHOWCASE JURY in the subject line. The images will be sent to the Christmas Showcase jury committee. You will be notified by email of the jury's decision.

Guest artists need not be an Arkansas resident. Complete this application and return with check (see below).

Artist Name(s): _____

Business Name: _____

Media Category: _____

Guild Member: ___ YES ___ NO (2017 dues must be paid to get Member booth rate)

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____

Email Address: _____

Website: _____

2016 BOOTH FEES NOTE: all booth fees include electricity:

Non Member

___ 10 x 10 @ \$325

___ DOUBLE BOOTH \$550 along wall

___ DOUBLE BOOTH IN CENTER has corner \$575 (ltd)

___ 10 x 10 corner in center \$350 (ltd. Availability)

___ 10 x 15 along wall \$450

___ 10 x 15 \$475 in center **with corner***

#__ Tables @ \$12 ea

#__ Chairs @ \$3 ea

***Note: 2 artists must request this to share a 3 booth segment.**

Total cost: _____

Booth reservation fee (\$100.00 Minimum) _____

Balance Due \$_____ (BY Sept. 1, 2016 - \$25.00 late fee after that date)

Cancellation Policy: Cancellations before October 1 will be charged a \$25 handling fee, deducted from the refund. No refunds after October 1, 2016.

Return this application and your check (payable to Arkansas Craft Guild) to
ARKANSAS CRAFT GUILD, PO BOX 800, MOUNTAIN VIEW, AR 72560

Payment Method:

Check # _____

Credit card: Number _____ (You can call the gallery at 870-269-4120 on Tuesday, Wednesday and Thursday, between 10 and 5 to pay over the phone, if you wish)

Name on Card _____

Expiration _____

CVV code on back of card _____

Signature _____ Date _____