



MERRIMACK VALLEY QUILTERS GUILD

Encouraging the art of quilting in the Merrimack Valley

P. O. Box 566
Haverhill, MA 01831

mvquilters.org

2023 QUILT SHOW: *SUMMER'S END*

Dear Vendor,

The Merrimack Valley Quilters Guild would like to invite you to be a vendor at our upcoming Quilt Show: *Summer's End*. Dates for the show are **Set-up: September 28th, 8:00-4:00**

Show: September 29th and 30th, 9:00-4:00

The show will be held at the Hope Community Church, 11 Hale Street, Newburyport, MA. This is a bright, inviting, and handicap accessible location. We have been very successful at this location with 500-600 people walking through every year. As in prior years, we are offering:

- 10' x 10' space which includes an 8' table with two chairs for \$100.
- 15' x 10' space which includes an 8' table with two chairs for \$150.
- Additional table for \$15.

Registration is on a first come, first-accepted basis. Applications should be sent in as soon as possible. We need the completed application and a non-refundable check no later than June 30, 2023.

Please include a business card with your application for a complimentary ad in the show booklet.

Half-page and full-page ads are available, and you will be given a \$30 credit toward the ad upgrade.

If you are unable to vend, consider advertising in our show booklet. Please complete the ad form and mail it back with payment no later than June 30, 2023. Enclosed with this letter is a vendor form as well as an advertising form.

Please return all forms to: Merrimack Valley Quilters Guild

P.O. Box 566

Haverhill, MA 01831

For any questions, email **Jennifer Wood** at vze2rxts@comcast.net or

Carol McPhee at cmcphee852@aol.com.

***Our vendors are a valued and important part of our show
and we look forward to working with you to make this a successful event!***

Thank you,

Jennifer Wood

Vendor and Ad Chair

Carol McPhee

Vendor and Ad Co-chair

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2023 VENDOR APPLICATION FORM

Set up: September 28, 8:00-4:00 **Show Dates:** September 29 and 30, 9:00-4:00

Space is limited and will be assigned on registration and receipt of payment.

Please return this form and fee no later than June 30, 2023. Once your application and payment is received, a confirmation email will be sent.

Name of Applicant: _____ Business Name: _____

Address: _____

Phone: _____ Email: _____

Website: _____

Please remember to enclose your business card for a complimentary ad in our show booklet.

- | | | | | |
|----------------------|--------------------------|---|----------|-------|
| Ad: | <input type="checkbox"/> | Complimentary business-card-size ad..... | \$0 | _____ |
| | <input type="checkbox"/> | Upgrade to half-page ad..... | \$20 | _____ |
| | <input type="checkbox"/> | Upgrade to full-page ad..... | \$35 | _____ |
| Requirements: | <input type="checkbox"/> | 10' x 10' space with 8' table and 2 chairs | \$100 | _____ |
| | <input type="checkbox"/> | 15' x 10' space with 8' table and 2 chairs | \$150 | _____ |
| | <input type="checkbox"/> | Additional 8' table..... | \$15 ea. | _____ |
| | <input type="checkbox"/> | I will need access to electricity (Please bring extension cord) | | _____ |
| | | Total amount enclosed | | _____ |

Check is payable to *Merrimack Valley Quilters Guild* (remittance is non-refundable).

Send check and completed form to: Merrimack Valley Quilters Guild
P.O. Box 566
Haverhill, MA 01831

I have read and agree to the terms of this application to participate in the *Summer's End* Quilt Show on September 29 & 30, 2023. To the extent permitted by applicable law, the signatory of this application releases the Merrimack Valley Quilters Guild and its affiliates, including but not limited to its members, employees, agents, and representatives from any and all liability, damage, loss, cost or expense incurred by the releasing party (whether or not due to negligence or other acts or admissions of the person so released) to the extent such liability, damage, loss, cost or expense is paid to the releasing party by an insurer under any applicable insurance policies.

Signature of Vendor Representative

Date

For internal use: Date Received: _____ Amount: _____ Check #: _____