

Vendor Application Form

Business Name: _____

(Please, express business name exactly how you would like us to put it in our program and other promotions.)

Contact Person: _____

Business Address: _____

Business Phone: _____

Email: _____

Website / Facebook: _____

Site Request (circle one):

Single: 15' x 15' = \$125.00

Double: 15' x 30' = \$ 250.00

Make checks payable to: BCIAFA and send checks or direct questions to:

Address: PO Box 6552, Wyomissing, PA 19610

Phone: (610) 698-5476

www.berkscelticfest.org

Email: kate.romans@berksirish.org

TO BE INCLUDED IN OUR PROGRAM, THE DEADLINE FOR VENDOR APPLICATIONS IS: May 15, 2023

Type of Business: Crafts/Gifts Food/Beverage Other: _____

Describe Merchandise:

List Special Requirements required for booth space:

Electric required: (circle one) Yes No

Voltage: _____ **Total Amps:** _____ **# of Outlets:** _____

Number of assisting personnel: _____ **Arrival Time to Festival:** _____