

JACKSONPORT 23rd ANNUAL CHERRY FEST - ENTRY FORM

DATE: Saturday, August 5, 2017

PLACE: Lakeside Park, Hwy. 57, Jacksonport, in Door County, Wisconsin

TIME: 9:00 A.M. to 4:00 P.M. Set up 6:00 A.M. to 8:00 A.M. sharp the morning of the show OR on Friday, August 4th. The Cherry Fest committee will provide night security beginning at 9 p.m. on Friday. You may drive into the park on Friday only – provided your space is accessible. **The park plan will be posted on a picnic table at the front of the park on Hwy. 57 at the Lakeside Park sign.** If you have any questions during set-up call 1-321-543-4887 (Gary Rezeau).

SET UP: After unloading, vehicles MUST be moved to the designated parking areas one block west on Hwy. V. **No vehicles may be left in the park or parking lot at the park. NO trailers, trucks, vans or cars belonging to display personnel may be left ALONG THE HIGHWAY AT ANY TIME. No early tear down is permitted. NO OVERNIGHT CAMPING is allowed in Jacksonport.** Make your reservations early. Go to www.Doorcounty.com for reservation information. Call the Door County Visitor Bureau at 1-800-52-RELAX for your free 2016 Vacation Planner. The planner is also available page by page online at www.Doorcounty.com

EVENT: Cherry Fest is sponsored by the Jacksonport Historical Society. Live music, food, a fine Arts & Crafts Show, car show and family activities are ongoing throughout the day. Check out the Jacksonport Historical Society website at www.jacksonporthistoricalsociety.org for more information on activities.

FEE: A NON-REFUNDABLE fee of \$65.00 is charged per 12 X 12 foot space. Make checks payable to the Jacksonport Historical Society. We will accept one entry per booth. Double spaces are available. ALL work displayed MUST BE done by the displaying artist. You may not share your booth with another artist. NO resale items or foreign made items are allowed. No refunds for inclement weather. Inclement weather teardown is at your discretion. Show chairmen have the right to ask you to leave if items do not represent your photos / wording on your entry form. During Cherry Fest, no vendors (those selling or promoting sales) will be allowed in Lakeside and Erskine Parks unless they have previously registered with and been approved by the sponsoring organization, the Jacksonport Historical Society (JHS). Roving vendors will not be permitted. The society reserves to itself the sole authority to sell desserts and related food and beverages on festival grounds during the festival.

NEW ENTRIES MUST include 3 photos of your work and a **self-addressed and stamped envelope for return of your entry reply.** **THOSE WHO HAVE DISPLAYED IN PAST SHOWS NEED NOT SEND PHOTOS** if you still have the same type of work. **However vendors who have attended previously must include a self addressed/stamped envelope for their show confirmation.** Photos will be returned the day of the show after review to verify the hand-crafted items on your display prior to 9 A.M. The committee has the right to fill your space by 8 A.M. on show day in your absence. Please call 1-321-543-4887 (Gary Rezeau) if you will be late or are unable to attend.

POLICIES: Each vendor must provide all his/her own tables, chairs and LEVELING BLOCKS for set up. Tents for cover are advised as not all spaces are shaded by trees. Refuse containers will be set up throughout the park. Please pick up your space – all packaging, extra boxes and food wrapping - prior to your departure from the show.

Please complete the form on the next page

Be sure to complete and sign the **Sellers** section of the S-240 form.

Wisconsin Temporary Event Operator and Seller Information

Information on this form is required under sec. 73.03(38), Wis. Stats.

Instructions on reverse side.

E V E N T O P E R A T O R	<p>PART A: Event Information: To be completed by the operator of the temporary event</p> <p>1. Name of Temporary Event _____</p> <p>2. Date(s) of Temporary Event _____</p> <p>3. Location of Temporary Event (e.g., Venue, City) _____</p> <p>PART B: Operator Information: To be completed by the operator of the temporary event</p> <p>1. Name and Address _____</p> <p>2. Daytime Telephone Number (_____) _____</p> <p>3. Email Address _____</p> <p>4. Wisconsin Tax Account Number _____ - _____ - _____</p> <p>If blank, check appropriate box:</p> <p><input type="checkbox"/> No Taxable Sales <input type="checkbox"/> Exempt under Occasional Sales Rule <input type="checkbox"/> Exempt Nonprofit Organization</p> <p><input type="checkbox"/> Other – Explain: _____</p>
S E L L E R	<p>PART C: Seller Information: To be completed by seller and given to event operator on or before the first day of event.</p> <p style="text-align: center; border: 1px solid black; padding: 2px;">THIS IS NOT AN APPLICATION FOR A WISCONSIN TAX ACCOUNT – SEE INSTRUCTIONS</p> <p>1. Legal Name _____</p> <p>2. Business Name _____</p> <p>3. Address (Street or Route) _____</p> <p>4. City, State and Zip Code _____</p> <p>5. Home Telephone Number (_____) _____</p> <p>Business Telephone Number (_____) _____</p> <p>6. Wisconsin Tax Account Number _____ - _____ - _____</p> <p>7. Social Security Number X X X - X X - _____</p> <p>8. Federal Identification Number (FEIN) X X - X X X _____</p> <p>9. Check one box indicating the type of activity you intend to engage in at this event:</p> <p><input type="checkbox"/> Selling Taxable Merchandise or Service <input type="checkbox"/> Display Only</p> <p><input type="checkbox"/> Selling Exempt Merchandise or Service <input type="checkbox"/> Exempt under Occasional Sales Rule</p> <p><input type="checkbox"/> Direct Sellers, Company Name _____ <input type="checkbox"/> Nonprofit Organization</p>

I declare that the information on this form is true and correct to the best of my knowledge and belief and that I am authorized to sign this form.

Print Name: _____

Signature: _____ Date: _____

Information about temporary events, including forms, instructions and Common Questions can be found on the Department of Revenue's website at revenue.wi.gov/html/temevent.html. If you have additional questions, please contact the Department of Revenue by email at DORBusinessTax@revenue.wi.gov or telephone at (808) 286-2776. See reverse side for submission instructions.

**** Do not email event reports to maintain confidentiality of seller information ****

8-240 (R. 12-14) This Form May Be Reproduced

Media _____ Email _____

OF BOOTHS REQUESTED _____ AMOUNT PAID _____ IN SHOW LAST YEAR _____

Photos Enclosed _____ How did you hear about us? _____

The undersigned agrees to abide by the rules outlined and assumes full responsibility for this entry and does not hold the Jacksonport Historical Society or its members responsible or liable in any way for personal injury, property loss or damage.

Signature _____ Date _____

Return to: Gary Rezeau, 3930 Turkey Point Dr., Melbourne, FL 32935-8533 until 6/15/17. Beginning 6/16/17 send to Gary Rezeau, 6154 Lake Shore Rd., Sturgeon Bay, WI 54235-9557 email: grezeau@mac.com