

**LAKE MEADOWS ART FAIR – 2011 APPLICATION**  
**June 18-19, 2011 – Lake Meadows Shopping Center**

**NOTE: You must print this document to fill in the form.**

Last Name	First Name	M.I.	Date
Street Address			Apt. No.
City	State	Zip Code	
Home Phone	Cell Phone	Business Phone	
Email Address:			
Website:			

**PLEASE NOTE: EXHIBIT SPACE CANNOT BE OCCUPIED BY MORE THAN ONE EXHIBITOR**

Registration Fees – Per Space (Please Check the Appropriate Space)

- Visual Artist (Paintings and Sculptures) **\$300.00**
- Art Gallery/Art Dealer **\$400.00**
- Artisans (Jewelry/Clothing) **\$300.00**
- Artist (Students) **\$75.00**  (You Must Forward A Copy of Your School I.D.)
- Artist (Senior Citizens – Ages 65+) **\$250.00**
- Arts Organizations (**5 Artist Maximum**) **\$750.00**  Organization Name: \_\_\_\_\_
- Include **Names of All Arts Organization Members** : \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Please describe the contents of your exhibit: \_\_\_\_\_

What name do you want on your booth sign? \_\_\_\_\_

Do you require a table and 2 chairs (included with registration fee)? Yes  No

Regular Lunch – Qty. \_\_\_\_\_  Vegetarian Lunch – Qty. \_\_\_\_\_

One (1) lunch is provided each day per artist. Additional lunches must be ordered and paid in advance @ \$8.00 Each.

Please include \_\_\_\_\_ additional lunches @ \$8.00 each \_\_\_\_\_ x \$8.00 = \_\_\_\_\_

(Note: One lunch will be provided for each member of the arts organization named above.)

Mail this form along with your deposit or the **payment in full as follows: Payable to: Helen Y. West**

**Mail to: 3219 S. Calumet Avenue  
Chicago, IL 60616**

**PAYMENTS**

**A minimum Fifty Percent (50%) Deposit is Required by April 30, 2011. Final Payments Due June 3, 2011.**

- I am enclosing \$ \_\_\_\_\_ for \_\_\_\_\_ additional lunches at \$8.00 per lunch.
- I am enclosing \$ \_\_\_\_\_ as my 50% deposit
- I am enclosing \$ \_\_\_\_\_ representing payment in full
- I am enclosing \$50.00 for payments postmarked after June 3, 2011 (this includes any balances due on deposits).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

For More Information Visit: <http://www.lakemeadowsartfair.com> Telephone: 312-593-0230