



**2021 ELISHA WINN FAIR
CRAFTER APPLICATION
GWINNETT HISTORICAL SOCIETY
P.O. Box 261 LAWRENCEVILLE, GA 30046**

Saturday October 2nd 10a.m. - 5p.m. and Sunday October 3rd 10a.m. - 5p.m.

The Winn Fair Committee is pleased to welcome your participation in the 42nd annual Elisha Winn Fair. The location is 908 Dacula Road, Dacula, GA 30019.

Vendor Name:

Street: _____

City: _____ State: _____ Zip: _____

Phone _____ Email _____

Please give us a list of items you intend to sell during the fair. This will help us in booth placement. All applications will be reviewed; however, the Elisha Winn Fair Committee reserves the right to disallow any vendor.

Fees:

_____ Single Space (10x12) - \$65.00

_____ Double Space (20x12) - \$100.00

_____ Electricity - \$10.00

Electricity is limited to certain areas. We need to know if you wish to be near a receptacle. You will need to furnish your own 50 - 100 ft. heavy-duty extension cords suitable for outdoor use.

Please list your electricity needs (specify amps)

In order to reserve a space at the fair, your application form and check must be received by September 15, 2021. Checks are non-refundable once vendors are accepted.

Set up is Friday, October 1st between 1 p.m. and 6 p.m. and Saturday, October 2nd from 7 a.m. until 9 a.m. Your vehicle must be off the grounds and parked in the lot across the road before 9:15 a.m. on the morning of the fair.

Please keep your display available to fair attendees until closing time.

If you have any questions, contact the GHS office at (770) 822-5174 or email Betty Warbington at WinnFair@GwinnettHS.org.

Office use only	Date	Check #	Amount:
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2021 ELISHA WINN FAIR WAIVER OF LIABILITY

GWINNETT HISTORICAL SOCIETY

P.O. Box 261 LAWRENCEVILLE, GA 30046

My participation in the Elisha Winn Fair does not entitle me to be covered under any Gwinnett Historical Society insurance. I fully understand that by my participation in this event that the Gwinnett Historical Society, its trustees, Executive Board, or members will in no way be held responsible or liable for any injury or malady to me or the public by me during the Elisha Winn Fair.

My signature below fully relieves the Gwinnett Historical Society from any responsibility for loss, theft, or damage and the above-mentioned injury to the public or myself. I attend and participate of my own free will, knowing the above stipulations. I understand the Gwinnett Historical Society will not be responsible or liable for any injury or loss to a crafter or vendor or their property.

Signature: _____ Date _____

Print Name:

Street: _____

City: _____ State: _____ Zip: _____

Please fill out and mail application with insurance waiver and check to:

Gwinnett Historical Society P.O. Box 261 Lawrenceville, GA 30046

Attn: Elisha Winn Fair