

****THERE WILL BE AN ADDITIONAL \$5.00 CHARGE PER SPACE FOR ALL CREDIT CARD TRANSACTIONS.

SMYRNA SPRING JONQUIL FESTIVAL ARTS & CRAFT SHOW APRIL 25 & 26, 2026 ARTS & CRAFTS APPLICATION

Application Deadline & Fee

THE DEADLINE FOR THIS SHOW IS MARCH 15, 2026. AFTER THE DEADLINE AN ADDITONAL \$25.00 LATE FEE WILL APPLY.

Address		City	State _		
Phone Number		E-mail:			
2. DESCRIBE & LIST A	ALL TYPES OF ITEMS	S YOU SELL:			
3. LIST THREE (3) PRI	EVIOUS SHOWS YOU	J HAVE PARTIC	IPATED IN A	S A DEALEF	₹
4. DO YOU PLAN TO A	ARRIVE FOR SET-UP	: FRIDAY	PM or	SATURDAY	AM
5SINGLE (12'X12') \$150.00 OR	DOUBLE	(24'X12') \$3	00.00 (Space	e Only)
6. APPLICATION MUS WITH ONE BEING OF PARTICIPATED IN A J	YOUR DISPLAY/SET	-UP. PHOTOS A	RE <u>NOT REC</u>	QUIRED IF Y	OU HAVE
	O: TOD MILLER, MA SMYRNA SPRING P.O. BOX 777	ANAGER G JONQUIL FES	TIVAL	facel	book
WITH APPLICATION T	O: TOD MILLER, MA SMYRNA SPRING P.O. BOX 777 KENNESAW, GA ying via credit card, fill-o	ANAGER G JONQUIL FES 30156 7	TIVAL ELEPHONE Authorization (face (770) 423-13 CCA) informat	book
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Credit Card Number: 3- Exp Date: 3- I to execute the credit car (above) and on the date my signature on the char	O: TOD MILLER, MASMYRNA SPRING P.O. BOX 777 KENNESAW, GAVING VISA digit security code on base signed (below). I underge slip, that a photocolation (CCA) cannot be resulted.	ANAGER G JONQUIL FES 30156 Out the Credit Card A MASTERCARE ack (4 - digit front for AM name of card holder) he ree that this autho derstand and conse py or fax of this age evoked.	TIVAL TELEPHONE Authorization (Billing Zip: EX): Preby representivation will be to the use greement will	facel (770) 423-13 CCA) informate AMEX Amt: t that I have to effective for of my credit of	he authority the amount card without original, and
If you are interested in pay Circle one: Credit Card Number: Exp Date: 1 to execute the credit car (above) and on the date my signature on the chat this Credit Card Authoriz	O: TOD MILLER, MA SMYRNA SPRING P.O. BOX 777 KENNESAW, GA ring via credit card, fill-over via credit via credi	ANAGER G JONQUIL FES 30156 Out the Credit Card of MASTERCARE ack (4 - digit front for AM name of card holder) here that this author derstand and conserved arge the amount specification will be returned by or fax of this agreeworked. arge the amount specification will be returned by or fax of this agreeworked.	TIVAL TELEPHONE Authorization (D Billing Zip: EEX): Preby represent rization will be greement will Date fied in the CCA, in the contract. I he contract. I he consoring, managing the contract. The consoring, managing the contract is the contract of t	face (770) 423-13 CCA) informate AMEX Amt: t that I have to effective for of my credit of serve as an offered will be given for ully understand a erby agree to independ or in any other	he authority the amount card without original, and is accepted cancellation all the details emnify and he or way particip.