

**TRANSPORTATION CHILDREN'S CENTER HOLIDAY FESTIVAL
VENDOR APPLICATION**

DECEMBER 4 & 5, 2014, 8:00 a.m. to 4:00 p.m.
Second Floor Atrium of the State Transportation Building

Name: _____

Business Name: _____

Address: _____

Phone: (day) _____ (evening) _____

Email address: _____

Please list and describe the items you wish to sell. **Please include price points and if you are a jeweler, please include photos.** (use separate sheet if necessary):

The cost of one 8' x 7' space is \$100 and tables are \$15 each. You may bring your own tables. The loading dock at the Transportation Building will be open at 6:30 a.m. Set up should be completed by 8:00 a.m. Storage facilities will be available in the building so you do not have to take your goods home after the first day. Breakdown will take place each day starting at 3:30 p.m. and no later than 4:15 p.m.

Spaces needed ____ x \$100 \$ _____

Tables needed ____ x \$15 \$ _____

TOTAL \$ _____

Electricity needed: Yes ____ **No** ____

PLEASE SEND APPLICATION AND CHECK TO:
TRANSPORTATION CHILDREN'S CENTER
ATTN: ELISE GREEN
10 PARK PLAZA, SUITE 3330
BOSTON, MA 02116

Application and check should be received no later than June 15, 2014.

For TCC Use Only:

Application/Fee Received _____
Confirmation Mailed _____
Application Complete _____