

Harvest Art Market
Silver Maples of Chelsea
100 Silver Maples Dr.
Chelsea MI 4811
www.silvermaples.org
734.475.4111

Saturday, Oct. 2, 2010
10 am to 4 pm

Harvest Art Market Guidelines & Application

- Applications must be postmarked or received electronically by August 13, 2010. We will confirm your acceptance by Sept. 3.
- All arts and crafts must be original and handcrafted by the artist. No manufactured items are allowed unless they are artist-designed and pre-approved by the Silver Maples Art Committee (e.g. postcards, t-shirts).
- Sharing a space is acceptable if artists each submit a separate, completed application.
- Each category, listed below, will be limited to 2-3 artists.

CATEGORIES

BASKETS

METAL

FIBER

PHOTOGRAPHY

FOLK ART

OTHER (DESCRIBE)

JEWELRY

SCULPTURE

GLASS

WOOD

WEARABLE ART

CERAMICS/POTTERY

MIXED MEDIA

PAINTING/DRAWING

PAPER

Application

NAME _____ SHARING ARTIST'S NAME _____

BUSINESS NAME _____

ADDRESS _____ CITY _____ ST _____ ZIP _____

PHONE _____ WEBSITE _____

EMAIL ADDRESS _____ CATEGORY _____

(over)

PLEASE SUBMIT THE FOLLOWING:

1. **Booth Fee of \$60** (per booth). Checks should be made payable to Silver Maples of Chelsea. No credit cards, please.
2. **Photographs** of examples of all media to be sold. Enclose a self-addressed stamped envelope for return of hard-copy photos.
3. **A detailed description of media** to be displayed and sold.
4. **Check here if you plan to share booth space with another artist.** Both artists must submit full applications, including photos, description and this form. One person can send fees or a share paid by each. Name of sharing artist _____
5. **Booth type preference** (1st, 2nd) below.

IN THE MAPLES ROOM (secure room overnight):

- _____ 8' wide x 6' deep
_____ 10' wide x 6' deep

Please note preference:

- _____ I prefer a booth with a wall
_____ I prefer a space with tackable surface
_____ I would like access to electricity
_____ No preference

6. **Number of tables and chairs you need** (no charge).
7. **Preferred set up time.** Please note how much time you need to set up. _____
Please indicate your 1st and 2nd choices.
Friday, Oct. 1: 10am ___ 11am ___ Noon ___ 1pm ___ 2pm ___ 3pm ___ 4pm ___
Saturday, Oct. 2: 7:30am ___ 8am ___ 9am ___

Special request: We will try to honor requests whenever possible:

I have reviewed and agree to abide by the Harvest Art Market Guidelines. I understand that I may only sell items of my own creation as pictured in submitted photographs and descriptions enclosed.

Your Signature _____

Date _____

Please complete and return this form with photos, description of your goods, and a check made out to **Silver Maples of Chelsea**. Electronic submissions may be sent to spersonke@silvermaples.org.

Mailed applications to:
Shawn Personke
Silver Maples of Chelsea
100 Silver Maples Dr.
Chelsea MI 48118

Any questions contact Shawn at spersonke@silvermaples.org or 734.475.4111 x 204.

We thank you for your application.