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(For office use only)

Ck\_\_\_\_\_Amt\_\_\_\_\_

Date\_\_\_\_\_

**ENRTY FORM  
LAKEFRONT ARTIST FAIR  
SATURDAY, MAY 4, 2019**

Your name (Print Clearly)\_\_\_\_\_

**Name as you would like it to appear in the Lakefront Artist Fair brochure:**

\_\_\_\_\_

**EMAIL ADDRESS**\_\_\_\_\_

**Mailing Address – Street/P.O. Box**\_\_\_\_\_

\_\_\_\_\_

City\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

Medium of Work\_\_\_\_\_

Exhibitors must enclose three photos or slides of their work, which will be returned on the day of the fair (or returned to you by mail in the event your application is denied.) Your booth fee will be cashed upon receipt; a refund check will be issued by Racine Montessori School in the event your application is denied.

**PLEASE RETURN THE FOLLOWING BY MARCH 15<sup>th</sup>:**

- \$75 BOOTH FEE (\$100 AFTER MARCH 15<sup>th</sup>)**
- THREE PHOTOS**
- ENTRY FORM**
- SELF-ADDRESSED STAMPED ENVELOPE**

**Or Email 3 CLEAR PHOTOS or WEBSITE INFO that represent your work to:  
janeduchac@racinemontessori.com)**

**TO: LAKEFRONT ARTIST FAIR  
RACINE MONTESSORI SCHOOL  
2317 HOWE STREET  
RACINE, WISCONSIN 53403**

I prefer to set up between  6:30 – 7:30 a.m.  7:30 – 8:30 a.m.

\_\_\_\_\_ I would like to donate an item to the RMS Silent Auction fundraiser.

Your signature\_\_\_\_\_Date\_\_\_\_\_