



ARTISAN
APPLICATION



Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Day Phone: (____) _____ Evening Phone: (____) _____

Cell Phone: (____) _____ Fax: (____) _____

E-Mail: _____ Website: _____

Products: _____

List all other venues at which you sell (names and days):

THE APPROVAL PROCESS REQUIRES THE FOLLOWING: 1) Application filled out;
2) Product list; 3) Product samples; 4) Photos of booth; 5) Seller's Permit

IMPORTANT: YOU MUST LIVE IN MAR VISTA AND MAKE WHAT YOU SELL.
All decisions will be made by jury.

Print your name: _____

Authorized signature: _____ Date: _____