2025 Handcrafted Holiday Market Sponsored by Zion Lutheran Church 1254 S. Union Street, Shawano, WI 54166 Sat., Nov. 15, 2025 9 AM-2 PM

Registration Form

The postmark on your application will determine your seniority for show purposes.

Your Name			
Business Name			
Mailing Address			
City	State	ZIP	
Phone	Cell Phone _		
Email			
Vehicle License	Vehicles [Description	
Please describe the product(s)) you make. (*Han	dmade products only)	
Number of Spaces (\$30 each) Number of Tables (\$5 each)		Electricity needed?	
Total \$ Included			
ENTRY QUALIFICATIONS All applications must include; neces and completed S-240 tax form (this processed.			
SIGNATURE (required) Please send completed applic Church to: Zion Lutheran Chi	ation form along v		

Attn. Deb Larson

1254 S. Union Street Shawano, WI 54166

ZION HOLIDAY MARKETPLACE INFORMATION

- * Application Fee is **\$30** per space. (Zion Holiday Marketplace will use all vendor fees for local outreach programs.)
- * Tables are NOT included. Tables are available for \$5 each.
- * All tables and display items must fit within designated space.
- * Application fee deadline is **October 16, 2025** or until full. Confirmation will be sent via email following acceptance of completed application. Space is not guaranteed until payment is received.
- * Cancellation Policy No refunds after October 15, 2025.
- * Each space is 10' x 10'. (There may be additional spaces available to later applicants or those requiring a wider/more shallow space). There are a limited number of spaces with electrical access. Please indicate if electricity is **required** for your booth.) _____ Electricity required
- * The majority of spaces are located in the downstairs fellowship hall, accessible by stairs or elevator. There are a few limited spaces upstairs.
- * A light lunch will be available for purchase.
- * Show hours: Sat., Nov. 15 from 9 AM- 2PM. (Vendors must remain open until 2 PM.)
- * Set up times: Fri., Nov. 14 from 3 PM-7 PM and Sat., Nov. 15 from 7 AM-8:45 AM.

I acknowledge that I will display/sell my products from the area assigned to me. I agree to indemnify, hold harmless the Zion Lutheran Church and promoters of the Zion Holiday Marketplace from all liability claims, demands, losses or damages that may arise as a result of my entry to this event and the use of the Zion Lutheran church property.

SIGNATURE REQUIRED Date

** Please submit completed application & check payable to **Zion Lutheran Church**.

Zion Lutheran Church

Attn: Deb Larson 1254 S. Union Street Shawano, WI 54166

Contact Info: Deb Larson (dklspeechlady1@gmail.com)

<u>Wisconsin Department of Revenue - Form S-240 Vendor Information</u> (Required as of October 2023)

* WI Seller's Permit # (15 digits starting with	า 456)
* SSN (last 4 digits)	
* FEIN-Federal Employer ID # (last 4 digits)	(If you have one)
* Exemption Code	
If you, the vendor, do not have a Wiscon sales are tax exempt, enter the appropri	sin seller permit number and claim your ate exemption code number.
 Exempt sales only or display only. Multi-level marketing company pays sa Nonprofit or occasional sales exemptio Exempt occasional sales (taxable sales 	n _.
* Legal business name (if not proprietor)	
* Doing business as, if applicable (trade name/fictitious name)	
* Vendor Name (Last)	(First)
* Phone # E-mail	
* Address (city)	_ (state) (zip)
* Multi-Level Marketing Company (if claimi	ng code 2 tax exemption)