



Celebrating 24 years
Saturday October 8th -11AM – 5PM
Rain Date October 9th

Sterlingfest
 PO Box 2754
 Sterling, VA 20167
www.sterlingfoundation.org
 click: sterlingfest link

REGISTRATION FORM

Please note that spaces are available on a first come first serve basis. **Your payment must be received by September 3, 2011 to secure your 10' x 10' booth space.** Please be aware that sponsorship opportunities are also available. For sponsorship information, please visit www.sterlingfoundation.org and click the Sterlingfest link. If you have any questions concerning booths, please contact Willie or Jeanne West at 703-450-4365 or email awestjwest@gmail.com. Mail your application with your check or money order payable to:

Sterlingfest C/O The Sterling Foundation

Mail to: **Sterlingfest**

PO Box 2754

Sterling, VA 20167-1036

CONFIRMATION LETTERS WILL BE MAILED BY SEPTEMBER 15, 2011.

Applications will be accepted thru September 3, 2011.

Spaces will be limited to three "like" businesses for the event (i.e. banks, image consultants, etc.)

Request for specific booth spaces cannot be guaranteed.

Spaces will be assigned on a first come, first served basis.

Spaces are limited so please send your application in as early as possible.

Businesses with the same corporate name (i.e. Mary Kay, Longerberger Baskets) will be on a first come, first serve basis.

Only one of each direct marketing business will be allowed. The first Application/payment received will be the first business accepted.

This is an indoor/outdoor event and will be held rain or shine (rain date Oct 10, 2010).

No refunds will be given. A \$30 fee will be charged for checks with insufficient funds.

Please be reminded that all vendors are required to furnish their own tables

A table can be provided or an additional fee of \$5.00

(Cut here and return bottom portion)

Name to appear on program: _____

Contact Name: _____ Home: (____) _____ Office: (____) _____

Street: _____ City: _____ State: _____ Zip: _____

E-Mail: _____ Product Description: _____

Vendor type please check only one: Business Vendor: Business Food Vendor: Fraternal Food Vendor:

Craft Vendor: Non Profit Vendor: Home Base Vendor: (Yes an additional \$5.00 Table Fee is included)

Please fine your appropriate category and cost on the attached Registration Rate Sheet.

Description of product or service _____

(FOR OFFICE USE ONLY)

DATE RECEIVED: _____ CK# _____ SPACE #: _____