

Northern Colorado Intertribal Powwow Association
30th Annual Spring Contest Powwow and Art Market ✧ April 13-14, 2024
Northside Aztlan Community Center; 112 E. Willow Street; Fort Collins, CO

Arts and Craft Vendor Application

Vendor Information:

Name: _____ Tribal Affiliation: _____

Company: _____ Tribal Census #: _____

Address: _____

City, State & Zip: _____

Telephone #: (Day): _____ (Evening): _____

E-mail address: _____

Website: _____

Name of assistant (for badge): _____

Brief description of items to be sold (required):

Booth Spaces:

- **All booths are subject to approval by sponsors. No unauthorized vendors will be allowed to set up.**
- All booths will be indoors on the arena floor or in the Eagle Room.
- Assignments of specific location will be handled by the vendor coordinator.
- Vendor setup begins at 12:00 p.m. on Friday, April 12th.
- Each space is 10 ft. x 10 ft. at \$125 per space/weekend. Indicate the number of spaces needed:

_____ space x \$125 for 1 space = \$ _____ **if postmarked by March 31, 2024**
_____ spaces x \$175/space = \$ _____ if postmarked April 1st and later

- Please bring your own tables and chairs. We have a **limited** number available for rent. Please reserve early:

_____ tables x \$10.00 each = \$ _____
_____ chairs x \$2.00 each = \$ _____

- **If you have any questions**, please call Meg at (970) 493-6470 or email us at ncipa.pw@gmail.com. List comments on back, if any.

Payment:

- Payment for booths must be made by check or money order at the time this agreement is signed.
- Make Check or Money Order payable to **NCIPA**. *(Please do not mail cash)*
- **Mail this application with your payment by March 31st to:**

NCIPA Vendor Coordinator
P.O. Box 1938
Fort Collins, CO 80522

I have enclosed: Check # _____ Money Order #: _____ Amount: _____

Vendor: My signature below confirms that I have read and understand the vendor agreement, and I agree to abide by all rules and regulations stated thereof. [If Vendor is a corporation or other organization: *I certify that I am authorized to sign for and bind such corporation or organization to this agreement and that I have signed in the capacity of for such corporation or organization.*]

Vendor's Signature: _____ Date: _____

For Committee Use:

No: _____ Postmark: _____ Balance Due: _____

Comments: _____