## **Dear Christmas Through Lowell Location Host,**

You have participated in the annual Christmas Through Lowell event in the past or have expressed an interest in participating in the 2024 show. Please read the enclosed information before submitting the application.

Return the application to our office by Friday, July 26, 2024.

## 32nd Christmas Through Lowell

Friday November 15 9 AM—9 PM Saturday November 16 9 AM—7 PM Sunday November 17 11 AM—5 PM



By signing this application you agree to abide by all of the following rules.

- Christmas Through Lowell items: Including Homemade, Antiques, Re-Found Treasures and Commercial Businesses
- **Food items:** A participant who sells food items made in the home (i.e. baked goods, canned goods, candies, etc.) is responsible for contacting the Kent County Health Department about their requirements (616) 632-7100.
- **Jury:** All <u>new applicants</u> will go through a jury process. To maintain the quality of our show, send two or three clear photos along with a complete description of your work when submitting your application.
- **Vendors**: If you are a location accepting vendors, you are responsible for them. Including vendor selection, fees and all communication. Locations accepting vendors will be updated on the Chamber website, if you keep us updated.
- Staging: Customers respond to a warm and inviting atmosphere. Use Christmas decorations, holiday music and scented candles or potpourri to create a festive environment. Display your crafts in unique ways, not just laid out on tables. Add outdoor lighting during the evening hours, especially on long driveways in countryside locations, etc.
- Insurance: The Lowell Area Chamber of Commerce cannot be held responsible for damage, loss, theft or personal injury during show hours, set-up or break-down. <u>You must provide Proof of Liability Insurance in the amount of \$500,000 for the days of this</u> event, which can be obtained from your Insurance provider. Proof of Insurance is required in order to participate and is due by October 15 at the kick-off meeting.
- Sales tax: You are responsible for reporting sales tax to the State of Michigan.
- Grand Prize, Door Prize, & Stamp Cards: Each CTL location host must provide two gifts—one \$15 (min. value) door prize gift at your location —AND— one \$5 (min. value) gift for inclusion in a grand prize basket of items given by the Chamber. The grand prize winner is drawn from the stamp cards you return to the Chamber by Wednesday, November 20, following CTL. Deliver your \$5 gift basket item to the Chamber no later than November 1st.
- **LowellBuck**\$: The Chamber will be donating (4) \$100 prizes in Lowell Bucks for all large direct mail postcards turned in. Return any postcards left at your location by Wednesday, November 20, 9 AM—3 PM.
- Hours of Operation: You <u>must</u> adhere to the posted hours of our Christmas Through Lowell event that you have agreed to on
  this application. Business starts at 9 AM Friday morning. Please do not close early on Friday, Saturday or Sunday. We strongly
  encourage you to be open all three days. Remember, the event is marketed as a three-day event. Encourage your vendors to
  work in shifts with helpers.
- Recipe: Recipes are no longer required. You may provide recipe cards if you feel this is a meaningful feature at your location.
- **Kickoff Meeting:** Location Hosts will meet at the Chamber building on <u>Tuesday, October 15, at 6 PM</u> to receive your event supplies, tree sign, and valuable information.

Completed applications are due to Chamber Office by July 26, 2024.
Applications received after the deadline must be approved and include \$25 late fee.

## 2024 CTL Location Ads

Design your own ad for the brochure OR supply brief copy and one photo that best represents your venue.

Deadline: Friday, July 26.

**NEW!** We will add a wheelchair icon to locations that are handicap accessible.



Ad Dimensions: 2 3/16" W x 2 1/4" H. Leave space for your site number and a handicap icon (if applicable).





## 2024 Christmas Through Lowell Application (vendor host location only)

Contact Name: Pho	one:
Mailing Address:	
Show Name:	Snow Phone:
Show Address:	Zip
E-mail:Website or Facebo	ook:
Complete description of exhibit:	
Check all that a	· · ·
□\$150 - locations with 1-25 vendors	□\$200 - locations with 26-50 vendors
☐ \$250 - locations with 51 and more vendors	□ \$25 LATE FEE after July 26, 2024
Our venue will be open the f	
□Friday □Saturday 9A-9P 9A-7P	
Is your location handicap accessible? ☐ Yes ☐ No	
Will you be serving food at your location (church cafeteria, food truc	ck, etc.)? □ Yes □ No
☐ This is a new show site since last year	
□ <u>NEW</u> participant — photos of my craft items are included with ap info@lowellchamber.org	plication, or I will email j-pegs of my work to
☐ Willing to add vendors to this venue. Please list my contact info o	on the event website.
☐ Map marked with exact venue location (found on back of application)	
☐ Have included my \$500,000 proof of active liability insurance cop	
Ad/Marketing information — chec	k appropriate choices:
☐ Use last year's ad.	in appropriate encicee.
☐ Final designed ad or ad content (copy, feature photo) has been e	emailed to info@lowellchamber.org.
$\hfill\Box$ Email product photos to info@lowellchamber.org for potential use	e on social media.
I have read all of the Rules and Regulations and agree to comp	oly with them:
Signature of Location Host:	Date Signed:
Send all required information	with payment to:
LACC, PO Box 224 – Lowell, MI 49331, or Call (616) 897-9161 with	email info@lowellchamber.org.
AVOID A \$25 LATE FEE: APPLICATION DEADLIN	NE IS FRIDAY, JULY 26, 2024, at 3 PM
Credit Card Type □ Visa □ Mastercard □ Discover Amount to be	e Charged:
Name as it appears on the Card	
CC Mailing Address	City State Zip
Credit Card Number:	Exp.Date
CC Security # (3 or 4 digit # on back)	



