

Celebrating
50
YEARS



This PDF is a fillable form.

Please enter your information
in the form fields, then print,
sign and mail with your check
and photos of your craft to:

Fall River Scholarship Foundation
PO Box 1721
Fall River, MA 02722

Name _____

Address _____

City, State, Zip _____

Phone _____

Primary Craft _____

Secondary Craft _____

The 50th Annual Christmas Arts & Crafts Fair

will be held at B.M.C. Durfee High School on December 5th and 6th, 2026

1. The Fair will be open to the public from 10:00 a.m. to 4:00 p.m. each day.
2. Your application must be received before November 2, 2026 accompanied by a non-refundable fee of \$135.00 for each space. If you wish to make two payments, a non-refundable check for \$75.00 should accompany this application and a check for \$60.00 must be received by November 2, 2026.
3. Each space will be 10 feet long and 5 feet deep. You must provide your own table and chairs.
4. Area placement is determined on the basis of primary craft listed above. Please be specific.
5. Two photographs must be mailed with your application. One will be of your display and the other will be of your primary craft.
6. All exhibitors are asked to report to the registration desk by 8:00 a.m. Doors to the gymnasium will be open at 7:30 a.m.
7. All work must be handcrafted and dealers of imported goods will not be allowed.
8. Our Committee reserves the right to remove any article displayed not considered suitable for the fair.
9. All booths must remain open until 4:00 p.m. each night.
10. Craftspersons may not sell candy or food nor sponsor a raffle at their tables.
11. All jewelry must be approved before application is accepted.
12. Gift Baskets containing food or any other type of non-handmade articles are not allowed to be sold.
13. The Fall River Scholarship Foundation assumes no responsibility for loss, damage or injury to any exhibitor's person, goods, wares or merchandise.
14. Mail completed application and check to Fall River Scholarship Foundation, Box 1721, Fall River, MA 02722.

I HAVE READ THE ABOVE RULES AND AGREE TO ABIDE BY THEM.

Signature

Email address (PLEASE PRINT CLEARLY)

MA Sales Tax Number:
