

**Where Womyn Gather**  
**Marketplace Permit Application and Festival Registration**  
**APPLICATION DUE DATE: FEBRUARY 25, 2012**

The Marketplace is an important part of the festival experience. We are grateful that you are offering to share your creativity. We are asking Marketplace applicants to pay full admission to the festival in addition to your Marketplace Permit fee. No two hour work shift is required of you.

PLEASE PRINT LEGIBLY

Name \_\_\_\_\_ Your Festival/Spirit Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (A.M.) \_\_\_\_\_ Phone (P.M.) \_\_\_\_\_

Email Address: \_\_\_\_\_

Website Address \_\_\_\_\_

---

Booth name for the Program Book and Website \_\_\_\_\_

Please write a 15 word description of what you are selling for the Vendor listing in the Program Book:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list all items that you will display for sale:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have included \_\_\_\_ (up to 5) photos of my work. Type of photo is: \_\_\_\_\_ Digital \_\_\_\_\_ Paper Photos  
Email digital pictures to wherewomyngather@gmail.com. Digital pics must include your name in the file name. Digital can be .jpg, .bmp or .tif.

Check all information you would like listed in the Program Book.

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone number \_\_\_\_\_ Email address \_\_\_\_\_ Website \_\_\_\_\_

Check all information you would like listed on the Website. (reminder: this is seen by the world)

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone number \_\_\_\_\_ Email address \_\_\_\_\_ Website \_\_\_\_\_

## BOOTH DEFINITION AND INFORMATION

### VENDOR BOOTH

You are expected to bring your own booth (tent) and tables, as well as enough goods to fill that booth.  
Fee: \$75

### BOOTH SIZE

Booth size is 12' x 12' when outdoors. If inside, booth size will be 8' x 8'.

### PRODUCTS

Please honor that WWG wants to provide a woman-made, hand-made crafts marketplace. All wares are to be made by the vendor attending the festival. You will be asked to remove anything not in compliance with these guidelines. First preference is given to the vendor whose focus is Goddess Imagery, followed by female affirming imagery.

### SET UP

Your booth must be ready for shopping by festival opening which is 12 pm Thursday. Vendors are expected to arrive Wednesday for set-up. You must have permission to arrive Thursday.

### VENDING

You or a knowledgeable attendant are requested to remain at your booth during daily operation hours. The hours will be listed in the program book.

### LOCATION

Booths will be set up outside the Dining Hall. Bring everything you need to anchor your booth in case of rain, wind. The rain location for booths is the Hearth.

### PROGRAM & WEBSITE DESCRIPTIONS

Your information will be printed in the Where Womyn Gather Program Book and also included on WWG website. Provide a photograph of one piece of your work that can be included on our website along with your information.

### RESPONSE

You will receive an acceptance letter with your permit by MARCH 11. If you don't get into the Marketplace, your voided check will be returned. All non-digital photographs will be returned with our response letter.

If you are not selected and would like to attend the festival you may do so at the \$275.00 rate.

Email any questions to: [wherewomyngather@gmail.com](mailto:wherewomyngather@gmail.com)

### **APPLICATION DUE DATE: FEBRUARY 25, 2011**

**Refunds:** All refund requests must be snail-mailed. Full Marketplace refund is given when request is postmarked on or before May 1. NO REFUNDS after MAY 1.

If possible, also email a copy of your complete forms to:  
[wherewomyngather@gmail.com](mailto:wherewomyngather@gmail.com)

**Craftswomyn  
Where Womyn Gather Festival Registration Form**

*Please use a separate sheet for each womon/gyrl/helper and enclose a SASE if you don't have email.*

Name \_\_\_\_\_ Your Festival/Spirit Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone (A.M.) \_\_\_\_\_ Phone (P.M.) \_\_\_\_\_  
 Email Address: PLEASE PRINT LEGIBLY \_\_\_\_\_

I am a first time attendee.  I have attended Womongathering and/or Spirit of Womongathering for \_\_\_ years.

**All cabins are smoke free. Cabin assignments are on first-registered basis. Alternate may be assigned.**

Housing: (select one)  
 General Cabin  Clean & Sober Cabin  
 Womyn & Babies/Toddlers Cabin  Moms & Gyrls Cabin (age or gyrl \_\_\_\_\_)  
 Group Cabin (Add cabin name if known.) \_\_\_\_\_  
 Group Name \_\_\_\_\_. There are \_\_\_ (up to 12) of us who wish to be housed together.  
 Tent  Mini Van/RV (no hook-ups available)  
 Private Cabin (additional fee applies) Sharing? List roommates name \_\_\_\_\_.

Special Needs:  
 Differently-abled: \_\_\_\_\_

Meals: Prices include three vegetarian/non-dairy vegetarian meals a day. Beverages are available for sale.

I do not eat dairy  
 I eat dairy products (eggs, cheese, cow's milk)  
 I will be arriving on Thursday (Dinner is the first meal available)  
 I will be arriving on Friday in time for:  Lunch  Dinner

Pre-Registration for Lakota Inipi Sweat Lodge: Pre-Registration is a must! (Times will be snail or emailed with your ticket)  
 Choose your time by circling your 1st, 2nd & 3rd choices. Space is limited to **25** for each lodge.

**If this is your first Sweat Lodge check here: \_\_\_\_\_**

Thur 2:15-4:30 pm	1 2 3	5:15 - 7:30pm	1 2 3		
Fri 7:15-9:30 am	1 2 3	10:30am - 12:45pm	1 2 3	3:15-5:30pm	1 2 3
Sat 7:15-9:30 am	1 2 3	10:30am - 12:45pm	1 2 3	6:15-8:30pm	1 2 3
				1:15-3:30 Gyrls Sweat (Under age 10 requires adult)	

Transportation:  
 Bus. Please pick me up Thursday (check one)  11:48 am or  7:58 pm in Hancock, NY and  return me Sunday.

Gyrlspace registration: Name(s) & Age(s) \_\_\_\_\_

Registration Fees:		
<input type="checkbox"/> Per Womon (age 15+) (must be postmarked by Feb 25)	275	Make payable to: Where Womyn Gather
<input type="checkbox"/> Marketplace Booth Fee	75	
<input type="checkbox"/> Gyrls 3-6 (age ___)	50	Payment Method: <input type="checkbox"/> Money Order
<input type="checkbox"/> Gyrls 7-14 (age ___)	95	
<input type="checkbox"/> Private Cabin Fee	70	<input type="checkbox"/> Check
<input type="checkbox"/> Round trip Bus stop (per womon)	15	
<input type="checkbox"/> Donation for 2012 Scholarship (fee assistance)	_____	
Total payment Enclosed	\$ _____	

**Refunds:** All refund requests must be snail-mailed. Full refund minus a \$100 handling fee is given when request is postmarked on or before May 1. NO REFUNDS after MAY 1.

**Mail this form to: Where Womyn Gather, 465 Patten Ave., Long Branch, NJ 07740**