



## **CRAFT FAIR INFORMATION SHEET**

**Saturday, November 21, 2026**

Burlington High School, 830 Cross Street, Burlington KS 66839



Organizations, clubs, church groups, artists and craftsmen are all welcome! Remember, the GIFT ANNEX is for those who have mostly commercial items and for direct sales. Food items may be sold as long as it has been approved. Spaces for food will be limited. Booth space is on a first-come, first-serve basis. Public is admitted free and concessions stand is available.

### **CRAFT FAIR FEES:**

- **8'x10' BOOTH FEE:** \$45/each  
Please drape the tables and leave a space beside your booth to allow crafters beside you to get in and out
- **ELECTRICITY:** \$5/booth (limited to 500 watts)
- **8' TABLES:** \$5/each (one table per booth)

### **CRAFT FAIR HOURS:**

**Saturday, 9am-4pm**

Items **MUST** be ready @ 9am  
(preferably 8:30am) and all booths  
**MUST** remain set up until 4PM

### **EARLY SET-UP:**

**6-9 pm**

**FRI, NOVEMBER 20**

**6 am**

**SAT, NOVEMBER 21**

### **RETURN ATTACHED REGISTRATION FORM W/ PAYMENT TO:**

Burlington Recreation Center

1110 Shea Street

Burlington, KS 66839

Make all checks payable to Burlington Recreation Center (BRC)

### **TO REGISTER OVER THE PHONE--EMAIL FORMS TO:**

[kschuster@usd244ks.org](mailto:kschuster@usd244ks.org) or [tnavarro@usd244ks.org](mailto:tnavarro@usd244ks.org)

**We will call for payment once we receive your form & enter it into our system.**

### **MISC INFORMATION:**

- Note booth requests on form. Requests ARE NOT guaranteed, but BRC strives to honor as many as possible.
- NO-SHOWS WILL BE REMOVED FROM THE MAILING/EMAILING LIST
- Please protect the floors
- BRC is not responsible for theft or damage

**CONFIRMATION RECEIPT:** If you want a confirmation receipt of your registration, please provide:

- a VALID e-mail address OR
- An enclosed self-addressed, stamped business-sized envelope

**PLEASE KEEP THIS SHEET FOR YOUR INFORMATION**

For more information, contact Burlington Recreation Center @ 620-364-8484





# **BURLINGTON CRAFT FAIR REGISTRATION**

**Saturday, November 21, 2026**

Burlington High School, 830 Cross Street, Burlington KS 66839

Notes:

|               |                   |                             |
|---------------|-------------------|-----------------------------|
| Contact Name: | Business Name:    | Email: Please print legibly |
| Address:      | City, State, Zip: | Phone:                      |

**Items to Be Sold:**

Please fill out the number of booths you want to reserve along with your needs for electricity, tables and chairs in the chart below. Please notate the total of your order.

| ITEM                           | PRICE     | QTY | TOTAL     |
|--------------------------------|-----------|-----|-----------|
| BOOTH SPACE 8' x 10'           | \$45/each |     |           |
| ELECTRICITY                    | \$5/each  |     |           |
| TABLE 8' (one table per booth) | \$5/table |     |           |
| CHAIRS                         | No Charge |     | No Charge |
| TOTAL                          |           |     | \$        |



**Booth Requests/Special Needs: (Requests are NOT guaranteed!)**

CONFIRMATION RECEIPT (circle one)

YES, email my receipt to the email address listed above

NO, I do not need a receipt

YES, use the enclosed, self-addressed, stamped envelope to mail my receipt

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**kschuster@usd244ks.org or tnavarro@usd244ks.org**

**NO PETS OR OPEN FLAMES ALLOWED.** In no case will the Burlington Recreation Commission be responsible for accidents, damage or loss of property. Exhibitors are responsible for collecting and declaring Kansas State sales tax in their own way. The majority of your booth must be handmade items. I have read the above rules and agree to abide by them. Non-compliance may result in forfeiture of booth space and fee.

**Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_**

|                |           |                           |            |                    |
|----------------|-----------|---------------------------|------------|--------------------|
| OFFICE USE:    |           |                           |            |                    |
| Date Enrolled: | Amt Paid: | Confirmation Sent: YES NO | Receipt #: | Employee Initials: |