



The 42nd Argyle Holiday Craft Fair

Hosted by
Argyle FFA & Argyle Yearbook
Argyle High School
14665 Hwy 78, Argyle, WI 53504

Date: Saturday, December 7, 2024

Time: 9:00 AM-2:00 PM. Set up: Friday from 1-6 pm & Saturday 6:00 AM.
Take down at 2:00 PM.

Location: Argyle High School Gymnasium, Argyle, WI

Fee: \$30.00 for an approximate 10' x 8' space. All booths will be assigned.
Artists are responsible for tables, chairs, etc. NO COMMISSION.

Eligibility: The committee reserves the right to reject any unacceptable work.
ALL WORK MUST BE ORIGINAL!

Deadline: All entries are based on first come, first serve
All entries must be in by November 1st, 2024
Mail application along with payment to:

Argyle School District
% Carmen Montgomery
P.O. Box 256
Argyle, WI 53504

Contact: For more information please call Carmen Montgomery at
608-543-3318 X 140 or by email at camontgomery@argyle.k12.wi.us

Special Note: Per a requirement from the WI Department of Revenue, we need to submit your contact information as a seller at our event. We have included a S-240 vendor form for you to fill out. This will be due when you set up your booth.

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Please return this form with your payment

Checks make payable to Argyle School District

Name	
Address	
Phone/ Email	In the future, would you like your registration form to be emailed to you? Yes or No
Art Craft Media	
Any Special Requests	

School District Use ONLY

Date of form received: _____

Check/ Cash/ Check # _____

Operator's Wisconsin Tax Number	Event End Date
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Part C: Vendor Information

If the vendor does not have a Wisconsin seller permit number and claims their sales are tax exempt, enter the exemption code number provided by the vendor.

- 1 - Exempt sales only or display only
- 3 - Nonprofit occasional sales exemption
- 2 - Multi-level marketing company pays sales tax
- 4 - Exempt occasional sales

Wisconsin Seller's Permit Number (16 digits starting with 456) 456--		SSN (last 4 digits)	FEIN (last 4 digits)	Exemption Code
Legal Business Name (if not sole proprietor)		Doing Business As (DBA) Name (if applicable)		
Vendor/Contact Name (Last)	Vendor/Contact Name (First)	Vendor Phone Number		
Mailing Address		Email Address		
City	State	Zip	Multi-Level Marketing Company (if claiming Code 2 above)	

