

HSA USED CURRICULUM SALE – REGISTRATION FORM

NAME: LAST _____ FIRST _____

CELL: _____ EMAIL: _____

EARLY REGISTRATION – *open ONLY to currently enrolled HSA families* - NOW through APRIL 1: \$10 per table

GENERAL REGISTRATION (*HSA families & Open to Public*) - April 2 to April 30: \$15 per table

LATE REGISTRATION – May 1 to May 14th: \$20 per table & postmarked registration by Monday, May 14th

REGISTRATION closes May 15. LIMIT 2 TABLES

Circle one: CASH or MONEY ORDER AMOUNT PAID _____ DATE: _____ Sorry, no refunds.

MAIL to: P.O. BOX 407, Springfield, MO 65801

****Cash payments made be made during our normal co-op hours (Monday 12:30 to 4); however, you MUST make arrangements with HSA Director via text message 417.501.9431*

CHECK-IN & SET UP of vendor tables begins at 10:45 AM

VENDOR PRE-SALE shopping from 11:30 AM to NOON

DOORS open to the PUBLIC at 12 NOON & close at 8 PM.

PLEASE INITIAL the FOLLOWING:

_____ I am participating in the HSA Used Curriculum Sale as a vendor/seller. I understand that HSA is not responsible for fire, theft, loss or damage to my items. Items may include: new/used school curriculum, teacher materials, classroom decorations, basic school supplies (i.e., notebooks, paper/pencils), electronic equipment, educational toys / games*/ movies*/books/costumes. **Please no R-rated movies/M-rated games.*

_____ I understand that I will be charged a table fee and that there is a limit of two tables. No outside tables, large bookcases or clothing racks are to be brought into the event. I may bring small lightweight shelving, such as milk crates & bookends, to display items on tables. I understand that I may display larger items and/or use small bookcases to display items underneath tables, and that said items will not impede walkways.

_____ I understand that tables will be assigned by HSA on a first come/first serve basis. I agree to have appropriate workers at my table(s) at all times in order to assist buyers. During the course of the sales event, I am allowed to vacate my table at my discretion (i.e., items sell out, family emergency) and will inform HSA sale coordinators prior to leaving.

_____ I am the owner of the items to be sold or have been given permission to sell items for a relative/friend in their stead.

_____ I will be responsible for pricing, tagging & selling of items, including receiving payments & making change. I will display my items in an organized manner and make an effort to maintain the appearance/arrangement of items throughout duration of the sale.

_____ During all stages of the sale, my children will be under my direct supervision OR supervised by a designated childcare giver. Children are NOT to be running around or roaming the sales event without supervision.

_____ At the close of the sale, I will clear my table/event area of all unsold items. I will clean my assigned table/floor space to ensure it is free of debris/trash prior to leaving the event. Vendors must vacate the building by 8:30 PM.

SIGNATURE: _____ PRINT NAME: _____

DATE: _____

