



Society of Vermont Artists and Craftsmen  
**FLETCHER FARM SCHOOL**  
*for the* Arts & Crafts

## Gift & Craft Shop Agreement

Society of Vermont Artists & Craftsmen (SOVAC) Gift & Craft Shop at Fletcher Farm School for the Arts and Crafts All items for sale in the Shop must be approved by a Board member for quality assurance and to avoid duplication of similar items.

**LIABILITY.** Each Crafter accepts all product liability for his/her merchandise and agrees to hold harmless the Society of Vermont Artists & Craftsmen, Inc. We will do our best to take good care of your items while they are in our possession, but will not be responsible for loss or damage beyond our control.

**COMMISSION.** SOVAC takes a 30% commission on all sales. Check payments from sales are mailed two weeks after each session. Participating members may choose to clerk at the shop to lower the commission based on a sliding scale.

### 2023 SESSION DATES.

Session 1: May 27 - July 2      Session 2: July 4 - Aug 6      Session 3: Aug 8 - Sep 4

### SLIDING SCALE:

SOVAC lowers the commission rate based on volunteer days each session:

- 1 Day worked = 25%
- 2 Days worked = 20%
- 3 Days worked = 15%
- 4 Days worked = 10%

**REJECTIONS.** If your work is not accepted for any reason, your fee will be refunded.

Payments for items sold in the shop will be made within 2 weeks of the end of each session.

Any items left in the Shop after closing for the season, will be at the owner's risk and the Society will not be responsible for those items.



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**Submit a copy of your agreement in the envelope provided or to the address below.**  
 Please maintain a copy of this agreement for your records.

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_

**Zip Code** \_\_\_\_\_

**Email** \_\_\_\_\_

**Phone** \_\_\_\_\_ **circle one: work / mobile / home**

**Commission Scale Please Check One:**

Clerking Member

Non-Clerking Member

**Please list the types of items you wish to offer in the shop. (Inventory will be handled separately.)**

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

\_\_\_\_\_  
 Signature Date

\_\_\_\_\_  
 Print Name

FOR OFFICE USE ONLY  
 ID \_\_\_\_\_  
 2023 Member Status  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Approval Signature Date