



Booth Number(s) _____

Southern Ohio Psychic and Holistic Fair

Exhibitor Application for Fair: OCTOBER 2017 ONLY

Applicant Exhibitor Information

Full Name: _____ Date: _____
Last First

_____ Business Name _____ Website Address

Address: _____
Street Address

_____ City _____ State _____ ZIP Code

Phone: _____ Email _____

Speciality, Seminars and Speaking

Please list your Metaphysical/Spiritual/Holistic Experience and qualifications:

Interest in Speaking, Seminar or Workshop:

Prior Psychic and Holistic Shows Attended Last 12 Months

Show _____ Where: _____

Show _____ Where: _____

Show: _____ Where: _____

Booths are assigned when all paperwork has been submitted and Approved by The Southern Ohio Psychic and Holistic Fair and all Booth Fees Paid. Booths are not permitted to be assigned to another Party without PRIOR approval of Fair Management. Thank you.