

## 2008 Kin On Open House & Holiday Crafts & Bake Sale – Event Information

**Date:** October 4, 2008  
**Time:** 10am – 4pm  
**Location:** Kin On Health Care Center

**Purpose:**

1. To offer an opportunity for the community to get involved.
2. To educate the community about Kin On, its mission, programs and services.
3. To raise funds to support Kin On and its programs in serving the Asian elderly community.

**Vendors:** All craftspeople and bakers are welcome!

Crafts vendors:

- All arts and crafts items must be handmade work. No commercially obtained items can be sold.
- Tables and chairs are provided free of charge. You can sign up for one full table (approximately 8' long x 30" wide) or half a table (approx. 4' long x 30" wide).
- Set-up time is at 9am. Each vendor is responsible for set-up and clean-up of his/her own table.
- Space and locations are limited and will be assigned on a first-come, first-served basis based on receipt date of the application form.
- Prices of craft items will be determined by the vendor.
- We kindly ask that you donate a minimum 25% of your proceeds to Kin On to be turned in at the end of the event.
- Lunch is not provided.

Bakers:

- All homemade baked goods, snacks (ie: Chinese tamales, desserts, etc.) are welcome. No store bought food items can be sold.
- Please drop off food items no later than 9:15am.
- Items will be priced by Event Coordinator before the event.
- All proceeds generated from the sale of food items will be donated to Kin On.

**Application Deadline:**

Please complete and return an application form by fax, mail, or email no later than **September 15, 2008**.

Kin On  
Attn: Holiday Crafts & Bake Sale application  
4416 S. Brandon St.  
Seattle, WA 98118  
Fax: 206.721.3626  
Email: [hwong@kinon.org](mailto:hwong@kinon.org)

**Questions?** Please contact Heidi Wong, Fund Development Coordinator, at 206.721.3630, [hwong@kinon.org](mailto:hwong@kinon.org).

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### 2008 Kin On Holiday Crafts & Bake Sale Application Form

**Vendor Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Type of vendor:**     **Crafter**     **Baker**     **Both**

**Table Preference:**     **full table**     **half table**     **N/A** (check this if you're donating baked goods)

**Brief description of your craft/food item(s):**

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

**Other comments/needs:**

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

Office Use Only: Received Date: \_\_\_\_\_