

Creative Arts Demonstration Form
(Please PRINT Clearly & Send in ENTIRE Form)

Name: _____ Home Phone: (____) _____

Address: _____ Work Phone: (____) _____

City, State & Zip Code: _____ Email: _____

Circle One: Prefer a 10 X 10 demo area. YES Prefer to demo within exhibit area. YES Best time to reach you? _____
What will you demonstrate?

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**Admission and Parking are FREE for our volunteer demonstrators. We require a minimum of 4 hours volunteer time.**

\_\_\_\_\_ Please mail my car and entry pass. \_\_\_\_\_ I will pick up my passes. (Please call ahead as this office is staffed part time).  
Please note that parking passes do not guarantee you a parking spot. Plan to arrive on the grounds early to allow for parking and walking time. A schedule for shuttle service will be available mid-August at [www.thebige.com](http://www.thebige.com).

**All demonstrators are responsible for cleaning their work area upon completion of their demonstration.**

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**Please check-off dates/times you would like to demonstrate. Please indicate 1st, 2nd, 3rd choice.
You will receive a phone call or email to confirm your date/time.**

Fri. Sept. 18 10-2 ___ 2-6 ___ 6-10 ___
Sat. Sept. 19 10-2 ___ 2-6 ___ 6-10 ___
Sun. Sept. 20 10-2 ___ 2-6 ___ 6-10 ___
Mon. Sept. 21 10-2 ___ 2-6 ___ 6-10 ___
Tues. Sept. 22 10-2 ___ 2-6 ___ 6-10 ___
Wed. Sept. 23 10-2 ___ 2-6 ___ 6-10 ___
Thurs. Sept. 24 10-2 ___ 2-6 ___ 6-10 ___
Fri. Sept. 25 10-2 ___ 2-6 ___ 6-10 ___
Sat. Sept. 26 10-2 ___ 2-6 ___ 6-10 ___

Sun. Sept. 27 10-2 ___ 2-6 ___ 6-10 ___
Mon. Sept. 28 10-2 ___ 2-6 ___ 6-10 ___
Tues. Sept. 29 10-2 ___ 2-6 ___ 6-10 ___
Wed. Sept. 30 10-2 ___ 2-6 ___ 6-10 ___
Thurs. Oct 1 10-2 ___ 2-6 ___ 6-10 ___
Fri. Oct 2 10-2 ___ 2-6 ___ 6-10 ___
Sat. Oct 3 10-2 ___ 2-6 ___ 6-10 ___
Sun. Oct 4 10-2 ___ 2-6 ___ 6-10 ___

Mail or FAX to: Creative Arts c/o Eastern States Exposition 1305 Memorial Ave. W Springfield, MA 01089 ATTN: S Wanczyk
FAX :(413) 205-5104 or email: creativearts@thebige.com.