

# NORTH PENINSULA RECREATION SERVICE AREA

## CHRISTMAS COMES TO NIKISKI

### HOLIDAY Craft Fair

**Saturday December 19, 2026**

Nikiski Community Recreation Center

Mile 23.4 Kenai Spur Hwy

Vendor Name

Address

City  State  Zip  Phone #

Email

Contact Person(s)

Booth Type: ☐ Craft ☐ Food/Beverage ☐ Other

Description of items:

Special Requests:

Vendor set up will available 11am-6pm Friday & 8:30-9:30am Saturday. set up by 9:30am Saturday and cleaned up by 5pm Saturday. You are responsible for cleanup of the area you are assigned. Booth fee is \$20.00/Booth. (A late fee of \$10.00/booth will be charged for all registrations received after the deadline) This fee should accompany your application or NCRC for arrangements. Booth spaces fit a 6-foot table; if you need additional space, please reserve an additional booth. Tables are not included in the fee. If needed, tables may be available upon request for \$5 each. Vendors are required to be set up for all hours of the show unless prearranged with event coordinator. Location requests are assigned by date registration is received. ALL Booths must have a KPB Borough Sales Tax Account Number. Food Booths will need to have permission from the Dept. of Environmental Conservation.

By signing below, I acknowledge that I have read and understand this application and agree to abide by all the rules. I understand that North Peninsula Recreation, the Kenai Peninsula Borough, employees and volunteers are in no way responsible for any loss, damage to property, or personal injury of any kind, and I hereby release NPRSA from any liability connected to participation in the Christmas Comes to Nikiski 2025 Holiday Craft Fair Event.

**Both Fee: \$20.00**

Cash, Check, or Credit Card accepted; Make Checks payable to: **NPRSA**

**\*Must be received on/before November 13, 2026\***

**NO REFUNDS WILL BE ISSUED! Craft Fair Hours: 10AM to 4PM**

Vendor Signature:  Date:

Number of Booths reserved:  x \$20 ea. = Total Booth Fee:  Late Fee \$10:

Number of Tables requested:  x \$5 ea. = Total Table Fee:  Total Fees:

NCRC Office Use: FEE PAID: ☐ CASH ☐ CHECK ☐ CC ☐ STAFF INITIALS:  DATE: