

Make checks payable to: Wartrace MusicFest.

Wartrace MusicFest

Saturday, June 3, 2017

(319) 521-4184 or (931) 389-9346

www.wartracemusicfest.org

leeanns1126@gmail.com

Vendor Name: _____

Phone: _____

Contact Name: _____ Email Address: _____

Address: _____

Description of your work or products to be sold (Please be specific, some of your items may be advertised):

Indicate the category that best describes your product: (circle all that apply)

Graphics

Painting

Metal

Wood

Baskets

Glass

Clay

Musical Instruments

Fiber/Fabrics

Traditional/Folk Art

Antiques/Collectibles

Food Other

Will you require electricity? There is a \$10.00 charge for electricity. THIS IS VERY LIMITED. Do not indicate YES unless absolutely necessary. YES ___ NO ___

Do you have any other special requirements? _____

APPLICATIONS MUST BE RECEIVED BY MAY 26, 2017 TO GUARANTEE A SPOT

CONDITIONS:

1. Booth Fee is \$35.00 for one (1) 12' x12' booth (non-refundable). You may rent more than one booth. Food vendor's booth fee is \$75.00 for one (1) 12'x12' booth (non-refundable). Please note that this is a rain or shine event.
2. Food Vendors are responsible for meeting all State Health Department requirements.
3. You cannot transfer your booth to another party without express permission from the show management.
4. Exhibitors must furnish tents, tables, chairs and display equipment.
5. Exhibitors will be responsible for collection and reporting of Tennessee State Sales tax (9.75%).
6. Exhibitors must leave booth area in the same condition in which it was found.
7. Set-up time is 8:00 a.m. to 8:00 p.m. Friday June 2 from 6:30 a.m. to 11 a.m. Saturday June 3
8. Event will be open from 12 p.m. to 10:30 or 11:00 p.m. on Saturday.
9. Exhibitors are expected to remain up and open through Saturday evening. **Breaking down tents and packing up to leave is unsafe and very distracting to the performers.**

Show management, the Wartrace Chamber of Commerce, the Town of Wartrace or Wartrace Property Owners will hold no responsibility for injury to you or loss or damage to your property.

YOUR SIGNED CONTRACT RELIEVES THE AFOREMENTIONED PARTIES OF ANY SUCH LIABILITY.

I understand the rules and agree to abide by and be bound to this contract.

Signed: _____ Date: _____

Please return signed contract to: Wartrace Chamber of Commerce, P.O. Box 543, Wartrace, TN, 37183

