

Chichester Old Home Days

Saturday, August 19, 2017

VENDOR FORM

Contact Information

Name	
Street Address	
Address line 2	
City, State, Zip	
Phone	
Email	

Craft/Product/Service Information

Craft/Product/	
Service Information	

Since no electricity is provided, will you be bringing and using a generator? If so, what type and size?

They will be inexpected by \_\_\_\_\_

Chichester Fire Department

Event Information

Number & Size of Booth	◇ 10'x10' space	\$30.00 ea	x	Total	\$
Spaces, Total Amt Due	◇ 12'x12' space	\$40.00 ea	x	Total	\$

FOOD VENDORS MUST PROVIDE PROOF OF INSURANCE

NOTE: All applications are subject to review by Chichester Old Home Days Committee. Placement is on a first-come first-served basis. All applications must include full payment. Vendors must supply their own table(s), chair(s) & tent(s)/canopy(ies). Before 9:00am Saturday and Gone by 5:00pm on Saturday

Agreement & Signature

By submitting this application and full payment, I understand that if I am accepted as a Vendor and do not attend the event that I will NOT receive a refund of any fees paid.

I/We \_\_\_\_\_ of the \_\_\_\_\_ agree to hold harmless the Town of Chichester Parks and Recreation Department, committees, commissioners, staff, volunteers, coaches, and instructors for accidents that may result for the entire program/event. The requesting organization assumes any and all responsibility when using the facility for special use and will see the facility is cleaned and made presentable before leaving the premies and will immediately report any damages.

I HAVE READ THE ABOVE INFORMATION AND UNDERSTAND IT IN FULL. I UNDERSTAND THAT THE POLICIES ARE STRICTLY ENFORCED.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

Please make checks payable to Town of Chichester - Old Home Day and mail checks and completed form to:

Note: Please make a copy of completed form for your records