

Juneteenth Vendor Application

Event Date: June, 19, 2010

Event Hours: 10 a.m. to 5 p.m.

Set-up time: 8 a.m. to 9:30 a.m.

Name: _____
Last First

Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Web Site: _____

Daytime Phone: _____ Evening Phone: _____

Type of Booth/Retail Items

Please indicate your **category of Retail** items by placing an "X" in the box beside the appropriate category(s). Please attach a detailed description of the items to be sold in your booth, along with photos if available.

Retail Items

Handcrafted Items

Information Booth

Art

Antiques

Other _____

Children's activity

Demonstration

specify _____

Specify _____

*Vendors selling food items must obtain a Douglas County Health Department food permit.

Please select the type of space you would prefer. All exhibitors are outside. This is a Rain or Shine event. Vendors are required to provide their own professional booth canopies, displays, tables and chairs. **Applications are due by April 16, 2010.**

June 19, 2010 from 10 – 5 pm. Standard Booth Fee \$50

June 19, 2010 from 10 – 5 pm. Premiere Plaza location Booth Fee \$100

June 19, 2010 from 10 – 5 pm. Food Vendor Fee \$100 (food vendors must have a self-contained trailer and provide proof of a Douglas County Health Department food vendor permit)

Please return this completed form with a check made payable to:

Black Education and History Exhibit

P.O. 219 Douglasville, GA 30133 Attn: Stephanie Aylworth, FAX: 678-715-2043

Release

Exhibitor/Vendor agrees to abide by the attached guidelines for the event. City of Douglasville. is not responsible for any damages or loss. Exhibitor/Vendor hereby indemnifies and agrees to hold harmless the event officers, committee members, staff and agents, the City of Douglasville, Douglas County, and the State of Georgia, against all claims, liabilities, damages and expenses (including the expense of litigation and attorney's fees) asserted against or incurred by them arising in whole or in part out of Exhibitor/Vendor's activities hereunder. Exhibitor/Vendor agrees that City of Douglasville may rescind this agreement and revoke immediately all of the rights of the Exhibitor/Vendor, his/her agents or his/her employees to exhibit space at the event for violation of the guidelines or any ordinance of the city of Douglasville or any law of the State of Georgia. Exhibitor/Vendor represents that all information provided in the application is true and correct. By signing below, Exhibitor/Vendor represents that he/she has read and understood all the guidelines attached.

Signature _____ Date _____

For more information visit www.ci.douglasville.ga.us or contact Stephanie Aylworth at 678-715-6092 or mainstreet@ci.douglasville.ga.us.