



VENDOR COMMITMENT FORM

December 2- December 24, 2017

Important Vendor Information– No refunds granted. Payment must accompany your application and spaces are filled on first come basis. Vendors with food, activities and items that reflect the winter holidays are preferred & will receive exclusive rights to one item without other vendor impeding. All spaces are 10' x 10' unless otherwise negotiated and all equipment (tents, tables, garbage cans, etc.) is the sole responsibility of the vendor.

Vendor/Booth Name: _____

Contact Person: _____

Telephone: _____ **Email:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Please mark all the apply:

_____ Food Vendor _____ Holiday Vendor _____ Local Arts & Crafts _____ Kids' Holiday activity

_____ 1 day vendor (\$35) _____ 3 day/weekend vendor (\$90) _____ 9 day/all festival vendor (\$200)

Please list all products being sold: _____

Circle date(s) you wish to vendor:

Dec 8 Dec 10 Dec 15 Dec 16 Dec 17 Dec 21 Dec 22 Dec 23 Dec 24

Circle 3 day/weekend you wish to vendor: Dec 15-17 Dec 22-24

Is Electricity Required? (110 volt plug with max 20 amp service) _____ YES _____ NO

Vendor Fee \$ _____

Total Enclosed Amount \$ _____

RETURN COMPLETED FORM/PAYMENT TO: Hope for North Brevard 416 Pine Street Titusville, Florida 32796

I understand that payment in full must accompany this application. I further understand that compliance with Health & Tax department requirements will be my responsibility. Further, I release Hope for North Brevard, Inc. and any other person involved with the festival from any claim, demand, suit, or course of action for any damage or injury occurring. I also give permission to a photo release to use and my likeness with or without identification.

Signature: _____

Title: _____ **Date:** _____

NOTE: Remember to make a copy of this form for your records.

For further questions contact Chrissy Gordon at cgordon@hopenb.org