

STREET FAIR VENDOR APPLICATION
Contact: Janet Harrington, Chair for Street Fair, 919-258-9855

2018 BROADWAY OUR WAY FESTIVAL
APRIL 21, 2018
BROADWAY, NC

Name of Exhibitor: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone Day: _____ Evening _____

E-Mail Address: _____

TYPE OF BOOTH (PLEASE CHECK)

CRAFT___ FOOD___ ANTIQUES___ EXHIBIT___ DEMONSTRATION___

Fully describe your booth: _____

Attach 1 photo of exhibit or food. Print name on photo and include a self-addressed stamped envelope for photo return. The Broadway Our Way Committee reserves the right to deny space to vendors due to limited spaces, duplication or anyone deemed inappropriate.

FEES

___ \$ 55 10'X10' Craft, Exhibit and/or Non Profit
___ \$150 10'x10' Food Concession for day event only. \$55 for each additional space
___ \$ 30 Electricity: 110___ Exhibitors MUST provide extension cord (100' min.)

___ **TOTAL DUE**

- **A LIMITED NUMBER OF SPACES WITH ELECTRICITY ARE AVAILABLE UPON REQUEST.**
- **ELECTRICITY MUST BE REQUESTED ON APPLICATION AND FEES MUST ACCOMPANY APPLICATION.**
- **FOR SPECIAL REQUIREMENTS OR QUESTIONS, CONTACT JANET HARRINGTON AT 919-258-9855.**
- **NO REFUNDS (UNLESS APPLICATION IS RETURNED)**
- **\$25 FEE FOR RETURNED CHECKS**

SEND COMPLETED, SIGNED APPLICATION AND CHECK MADE PAYABLE TO BROADWAY OUR WAY TO:

BROADWAY OUR WAY
c/o Janet Harrington
PO BOX 926
BROADWAY, NC 27505

Vendors will not hold the Town of Broadway, Festival directors, volunteers or employees responsible for claims, fees, damages or expenses. By signing below, you are stating that you have read the Vendor Application and accompany information and that you and/or organization will abide by the rules or risk being removed from **Broadway Our Way**.

Please Print Name: _____

Signature _____ Date _____

NO PETS, PLEASE