

2024 'Burg Bash Festival Saturday, October 19 ~ 2:00 PM - 10:00 PM Food Vendor Application

| Date & Time Received | | | | |
|----------------------|----|------|--|--|
| Check | or | Cash | | |

| Company Name: | | | | |
|--|---|---|--|--|
| Name: | | | | |
| Day Phone: | | Cell Phone: | | |
| Address: | | | | |
| City: | State: | | Zip Code: | |
| E-Mail (primary me | eans of contact): | | | |
| | | ATEGORY: dogs BBQ | Sweet Items | |
| | | | | |
| | | | | |
| Attach or Email Pic | tures of products to <u>lbarbos</u> | a@lee.ga.us S | ubject Line: (Company Name) | |
| 10'x10' Space ~ Nu | mber of Spaces Required | | LATE FEE AFTER September 20 | |
| | Total \$ | | | |
| Deadline: Friday, S Lee County Chamber 106 Walnut Ave. No. 229-759-2422 Fa | r of Commerce rth - Leesburg, GA 31763 | LATE FEI Each addit | : NO CHARGE for 1 - 10x10 space E AFTER September 20 - \$25 ional 10 x 10 space is \$50 each ide a copy of your 501(c)(3) | |
| Each vendor will be rest for their own garbage on not be responsible for any | sponsible for their own set up and cans and clean up. Dumpsters will y injury or loss that may arise or con | tear down including be provided for you me to the exhibitor. | ndor will not dismantle the booth until 10:00 PM. ng tables, chairs and tent. Vendors are responsible our use. The festival will not provide insurance or will or his/her employees or his/her goods from any cause e festival will not be responsible for items lost, stolen, | |
| | hat this festival is a family-oriented we from display any item or items that | | ors of all ages, therefore: The festival committee will fensive or questionable taste. | |
| have more than one ver is an outdoor show to be available. We reserve th | ndor selling a similar product (suc e held rain or shine. No refunds! | h as jewelry, pain Bring your own te ons to encourage a | act. The Burg Bash committee reserves the right to tings, etc.), if the products are diverse enough. This ent or protective covering. NO electrical outlets are a variety and prevent overlap. Please indicate your gning below. | |
| | Vendor Signature | | Date | |