

GARDEN WALK 2019 VENDOR APPLICATION

Friday, April 26th, 5pm-8pm

Plant City Commons Community Garden (2001 E. Cherry Street, Plant City, FL)

Phone: (813) 763-7043 Email: Breanna@plantcity.org

INFORMATION (PLEASE PRINT)

Your Name	
Vendor Name	
Address	
City/State/Zip	
Email	
Cell Phone	
Description of Item(s) to be sold:	
Booth space: <i>Space includes one 6' table.</i> Booth space (10' x 10') - \$25 <input type="checkbox"/> Additional spaces _____ X\$ 25	Total Amount Enclosed \$ _____
Electric: <i>At this time, we cannot guarantee electricity. Please mark below if you are bringing a generator.</i> NO <input type="checkbox"/> (\$0) Personal Generator <input type="checkbox"/> (\$0)	Payment must be received by Friday, April 19, 2019 or your space will not be guaranteed.
Please mail payment and contract to: <p style="text-align: center;"><i>Garden Walk 2019 Attn: Bree Wilson 106 N. Evers Street, Plant City, FL 33563</i></p> <ul style="list-style-type: none">• Contract and payment are due no later than Friday, April 19th. Payment can only be made by cash or check. Checks must be made payable to "Plant City Commons"• Vendors can begin setting up at 3:00 pm, you will be notified of booth location upon arrival. Due to safety reasons, vendor vehicles must be out of the vendor area and in the parking area by 4:30pm. The event runs 5:00pm-8:00pm. You will not be able to breakdown your booth until after the event. <p style="text-align: center;"><u>NO REFUNDS</u> / <u>CASH/CHECK ONLY</u> / <u>PAYMENT DUE 4/19/19</u></p>	

The undersigned agrees that he/she has been informed of and understands the rules and regulations of the event and will be able to comply with all of the rules and regulations described. The undersigned understands noncompliance will result in removal. _____ (please initial).

The undersigned also agrees to indemnify and holds harmless the Greater Plant City Chamber of Commerce, Leadership Plant City, the City of Plant City, The Plant City Commons Community Garden, Hillsborough Community College, and any building owners or tenants of any/all liabilities.

Authorized Signature _____

Date _____