



**Sunday - May 5, 2019**  
**10:00 AM to 4:00 PM**  
 Downtown Lombard - St. Charles Rd.  
 Lombard Chamber of Commerce  
 www.lombardchamber.com  
 630-627-5040 - info@lombardchamber.com

**HOME PARTY VENDOR APPLICATION AGREEMENT** (Please Print Legibly)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Home Party Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please initial:** \_\_\_\_\_ I understand that only ONE of each Home Party Vendor Business type will be allowed on a first-come, first-served basis, and that prior participation is not an automatic guarantee of 2019 participation.

Preferred Set-up Time (please circle one)			Early Bird Fee Postmarked by 3/1/19	Standard fee postmarked on or after 3/2/19	SUBTOTAL
7:00 AM	7:45 AM	8:30 AM	<b>\$125</b>	<b>\$150</b>	
<b>Electric</b>	<i>Limited availability and location options</i> . Extension cords and outlet strips NOT provided. Lombard Public Works will outfit a tree vault with a special adapter. <b>Attempting to plug directly into the outlet, can cause the entire block to lose power! NOTE: Other forms of power, ie: car battery or generators are NOT allowed.</b>			<b>\$50</b>	
<b>Select Payment Type</b> Please Circle	Visa	MasterCard	Amex	Discover	<b>Add \$5 Credit Card Fee</b>
	Personal Check	Cashiers Check	Money Order	<b>NOTE: \$40 fee for checks returned due to non-sufficient funds (NSF)</b>	
I apply for participation in the 2019 Lilac Time Art and Craft Fair. By signing below, I state that I have read and agree to all of the governing rules and guidelines, and I understand that <b>once my entry is approved, all fees paid are non-refundable and non-transferrable.</b> Not valid without signature.					<b>TOTAL</b>

Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

**Credit Card Payment - please print clearly**

Visa or MC # \_\_\_\_\_ Exp. \_\_\_\_\_ Code \_\_\_\_\_

Name on Credit Card \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Email Address for Receipt \_\_\_\_\_

**Mail Application With Payment To:**

**Lombard Chamber of Commerce - 10 Lilac Lane - Lombard, IL 60148**