

Mail/Email completed application and check made out to
Perry Chalk Art Festival:
Rachel Webster
2584 Coe Road
Perry, NY 14530
Telephone: 585-237-5633
Email: rwebster3@gmail.com



Perry Chalk Art Festival Vendor Application 2010

Business Name:	_____
Contact Name:	_____
Address:	_____ _____
Telephone:	_____
Email:	_____
Type of Vendor:	_____
Do you need electric for your booth?	_____

Perry's Public Market Specifications:

This event is one day only. It will coincide with the Perry Farmers' Market, the Chalk Art Festival and Tour de PER'RY.

- Day/Time:** Saturday, July 10, 2010 from 8:30am to 1:30pm.
Rain date is Saturday, July 17, 2010
Arrival time for vendors to set up is 7:45am. **No set-up or tear-downs during event hours.**
- Vendor Fee:** **\$20.00** for a 5' x 10' space. Please mail in \$20.00 fee with application.
Make checks payable to *Perry Chalk Art Festival*
If electric is needed, there is an additional charge of \$4.00. Please add this with application fee.
Outlets are limited and will therefore be on a first come, first serve basis.
- Insurance:** The Village of Perry has waived the insurance requirements for non-food vendors for this event.
- Food Vendors:** Health Department permit and general insurance will be required. Please submit along with application.
- Tents/Tables:** Vendors are responsible for bringing their own tents, tables, chairs, weights (booths will be placed on the street and/or sidewalk so there will be no place for stakes) and all other set up materials.

Deadline for application and fee: Thursday, July 1, 2010

For any special needs/ requests, contact us ASAP (585-237-5633) **No Refunds will be given after July 3.**

As a vendor wishing to rent space in Perry's Public Market, I agree to save, hold harmless and indemnify the Perry's Public Market, its sponsoring agency, members and employees from any and all liability or responsibility pertaining to any damages to person or property on the site leased to me from said market, when such damages, or liability arise out of any acts of my own, or of my employees or associated, located at said site.

Vendor Name (please print)

Vendor Signature

Date