

MCCA Event Vendor Application Form

Vendor Name _____

Business Name (if different) _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

Vendor Fee (non-refundable) ___ Retail - \$75 ___ Food-\$100 (Food Permit Manitowoc Co. Health Required)

___ Retail, 2 Days - \$100 ___ Food, 2 Days - \$150

___ Retail, 3 Days - \$125 ___ Food, 3 Days - \$200

Non-Profit Organizations ___ Literature Only - \$25 ___ Other (raffles, t-shirts, etc.) \$50

___ Food - \$100 (Food Permit Manitowoc Co. Health Dept. Required)

Please Check day(s) you'll attend Krazy Daze 2016:

___ Friday, July 8 – advertised hours 10:00 - 6:00 (Set-up time 8:30am)

___ Saturday, July 9 – advertised hours 8:00 – 4:00 (Set-up time 7am)

___ Sunday, July 10 – advertised hours 12:00 – 4:00 (Set-up time 10:30am)

What do you need for operation? (Please check all that apply)

___ Electricity* ___ Concrete Surface (This is a park, so all others are grassy)

*110-volt electrical service available for a \$20 fee. (Limited Number Available)

Complete this Form and return with a check for \$_____ payable to MCCA and a copy of your current liability insurance naming MCCA as additional insured. (Contact your Insurance Agent for details)

These items MUST be received by June 30, 2016.

Please send to:

MCCA

PO Box 845

Manitowoc, WI 54221-0845