

AKRON COMMUNITY CENTER HOLIDAY EXTRAVAGANZA VENDOR APPLICATION

Please complete all components of this form to apply for a table(s) at the Akron Community Center Holiday Extravaganza so that we may serve you.

TERMS AND CONDITIONS

1. Tables are rented on a first come, first served basis. The Akron Community Center (ACC) coordinators reserve the right to limit the number of vendors in a particular category (i.e. jewelry) and deny a vendor based on appropriateness of products. Vendor must be professional and respectful to customers and other vendors at all times.
2. Set up begins Friday before the event from 5pm to 7pm or Saturday from 8am to 9:45am. Vendors must be set up and ready to open their tables at 9:45am.
3. \$35.00 for a single 8ft table. Table coverings are required and furnished by vendor. Electrical access is an additional \$5.00 per vendor. Note: Electrical access is very limited and will be approved on a first come, first served basis. Vendor must provide their own electrical cords.
4. Vendors are responsible for the set-up, maintenance and tear-down of their own tables. Vendors may not impair or interfere with other spaces (i.e. signs or display blockage). No hanging items from the walls. Vendors may not move locations once a space has been assigned. No exceptions.
5. Cancellation Policy: If a vendor cancels on or after one month prior to event, they will forfeit their rental amount.

All vendors are asked to do a sign-up give away/door prize at your table. Vendors call the winner. If you would like your winners announced on Facebook, you need to provide that information.

Please fill out the form completely.

Name _____

Business Name _____

Street Address _____

City _____ State _____ Zip Code _____

Phone Home _____ Cell _____

Email _____

Brief description of your product(s): _____

Number of tables needed (\$35 each) _____ x \$35 = \$ _____

Electrical access (\$5 per vendor) _____ x \$5 = \$ _____

Total amount enclosed \$ _____

Make your check payable to Akron Community Center. Mail your complete application and check to: **Akron Community Center, PO Box 31, Akron, IN 46910**

PARTICIPANT WAIVER: I waive all liability of personal harm arising out of my participation in the Akron Community Center Holiday Extravaganza and accept full responsibility for liability and any property damage (i.e. tables, chairs, carpet, etc.) I may cause.

Signature of applicant

Date