

AKRON AFRICAN-AMERICAN CULTURAL ASSOCIATION celebrates

its 36th Anniversary this year. The AAACA was actualized as early as 1978 with the purpose of exchanging knowledge and musical experiences.

To encourage the cultural aspect to present a certain education and a mission to facilitate the African and African-American cultural, historical, civic and the youth needs to the Akron African-American community. Set a relaxing atmosphere and participation in the festival that is open to all nationalities for children or keen adults, families who wish to spend the days with music in a pleasant environment.

THE FESTIVAL WILL TAKE PLACE IN DOWNTOWN, LOCK 3 PARK, 200 SOUTH MAIN ST. AKRON, OHIO

We are looking for high quality products, either handmade or unique and beautiful. Artisans and crafts people are highly encourage in applying, food vendors will be based on affordable and creative menus. Generators must be muffled! (This will be strictly enforced). Booth locations will be assigned at the discretion of the Arts.

Festival Committee and menu limitations may be requested in order to avoid duplications.

Temporary Food Permit.

This is received from the AKRON HEALTH DEPARTMENT (for information, call 330 375 2405 from 8:00am-4:30pm) by July 1 2016 by 3: oopm to pick up your temporary food packet.

ALL VENDORS

PLEASE INDICATE THE TYPE OF BOOTH DESIRED

Notification of vendors' selection space/s will be mailed the week of June 13 2016

1. By submitting this application vendor commits to if accepted. No refunds will be made for cancellations.
2. Please describe fully all food items for sale
3. Describe size& type of structure (tent, trailer, pushcart, other)
4. Signature of authorized representative and date
5. Includes all categories, non-profit & commercial

TOTAL INCLOSED \$\$\$\$

\$ 250 (10' x10') _____

\$ 375 (10' x 15') _____

\$ 450 (10' x 20') _____

\$ 550 (15' x 15") _____

\$ 375 (CART) _____

\$ 75 (NON-PROFIT/NON-SELLING BOOTH)

\$ 100 Healthcare Pavilions _____

Healthcare pavilion will get 1(one) table 2 (two) chairs indoor space if you are doing screening or testing or/and need electricity please note it on the application.

You will be contacted by email concerning acceptance.

Office Use Pd _____

Confirmed Date _____

36th Akron African-American Cultural Festival

Applications will not be processed without all requirements being met. This application is also available on our website:

www.akronafricanculture.com for more information, please call/email

ladylock20@sbcglobal.net /330 753 0084 FRANCES PERKINS

debrajza55@aol.com /330 836 1527

DEBRA CALHOUN

Name: (Please Print)

Business Name: (As it will appear on your booth)

Address:

City/State/Zip:

Email:

Phone:

Describe you wears, art, craft, food etc...

SEND APPLICATION MATERIALS & FEE TO
AAACA/AKRON AFRICAN-AMERICAN CULTURAL
ASSOCIATION P O BOX 44320

TERMS OF EXHIBITION

STAMP

I verify that I have created and have the right to display all of the work I have applied to exhibit during this Festival. I have read all the guidelines and rules concerning the AKRON AFRICA N-AMERICAN CULTURAL FESTIVAL and agree to abide by them.

GENERAL RELEASE: By signing, I hereby discharge, release and hold harmless the AKRON AFRICAN-AMERICAN CULTURAL ASSOICATION, its employees, committees, volunteers and sponsors, and the City of AKRON of and from any and all manner of actions, suits, damage or claims whatsoever arising from any loss or damages or claims to the person or property of the undersigned or anyone's property in the undersigned's possession or supervision during the term of this Festival. This application/contract shall be deemed to have been made in the State of OHIO and shall be interpreted in accordance with the laws of said state. The AAACA will not assume liability for any act of God, natural disaster, exposure to adverse weather conditions, damages, injuries, or any legal authority or any cause above and beyond its control. Fees will not be refunded due to inclement weather or other extenuating circumstances. Applicant Signature/s _____

_____ (Each exhibitor must sign if exhibiting jointly)

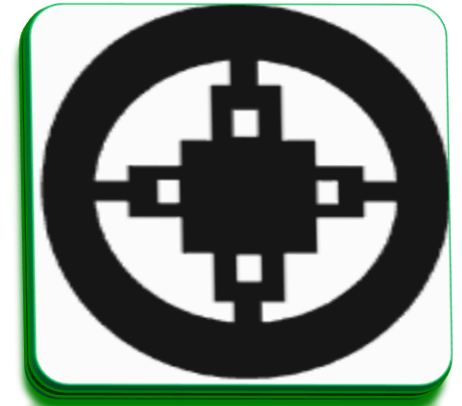
Date _____

AKRON AFRICAN-AMERICAN
CULTURAL ASSOCIATION
P O BOX 8332
AKRON OHIO 44320



AKRON AFRICAN-AMERICAN CULTURAL ASSOCIATION P O
BOX 8332 AKRON OHIO 44320

*36th Akron African-American
Cultural Festival
July 16-17 2016*



DAME-DAME
Intelligence, ingenuity

Lock 3
200 South Main Street
Akron Ohio 44320

Togetherness Starts at Home