Vendor Application 2018 APRIL 17 – 21, 2018

Oklahoma '89ers Days Celebration

American Legion LeBron Post 58 P O Box 69, Guthrie, OK 73044 405-282-2589

| Contact Information | | | |
|---|--|--|-----------|
| Name | | | |
| Street Address | | | |
| City ST ZIP Code | | | |
| Home Phone | | | |
| Cell Phone | | | |
| E-Mail Address | | | |
| Booth Requirements | | | |
| Food Vendor Space 10 x 20 w/Electric & Water @ \$500.00 | | | \$ |
| Craft/Food Vendor 10 x 10 w/Electric @ \$200.00 | | | \$ |
| Craft Vendor 10 x 10 @ \$150.00 | | | \$ |
| Supply Vehicle Parking w/220 amp Service @ \$75.00 | | | \$ |
| Supply Vehicle Parking w/110 amp Service @ \$50.00 | | | \$ |
| Supply Vehicle Parki | ng without electric @ \$20.00 | | \$ |
| | | Total Due | \$ |
| PREPAID FOR 2018 | MONEY RCVD BY: | | * |
| FREFAID FOR 2016 | MONET ROVD BT. | | |
| tems Being Sold | è | | |
| Tell us what your products/ | menu consists of | | |
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| Special Needs | | | |
| • 0.00000000000000000000000000000000000 | nents here. You will be contacted individual | ly to resolve thes | e needs |
| siot arry additional roquiron | ionio noro. Tou will be somacted marvidual | ly to resolve thes | e riceus. |
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| Previous Vendor Eve | ents Attended |
|---|---|
| Summarize your previou | s vendor events. If none, please let us know. |
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| | |
| Person to Notify in C | ace of Emergency |
| Person to Notify in C | ase of Emergency |
| Street Address | |
| City ST ZIP Code | |
| Home Phone | |
| Cell Phone | |
| E-Mail Address | |
| Agreement and Signa | ature |
| By submitting this application if I am accepted as a veri | ation, I affirm that the facts set forth in it are true and complete. I understand that ndor, any false statements, omissions, or other misrepresentations made by me result in my approval being rejected or my being asked to leave this Event. |
| defend, indemnify and of Guthrie, their officials, er demands, expenses, or l | ays Celebration participant does hereby agree to forever release, discharge, therwise hold harmless the American Legion LeBron Post 58 and the City of imployees, agents and servants of, from, and against any and all claims, losses of any kind whatsoever, due to personal injury (including death) and/or from or during, on account of, or in any way related to participating in the elebration Event. |
| By signing below, '89er I the application. | Days Celebration event participant agrees to all terms and conditions as stated in |
| Name (printed) | |
| Signature | |
| | |

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Return: This application form, **FULL PAYMENT** copy of your Oklahoma Sales Tax permit, photos, Certificate of Insurance (*required of Food Vendors in the amount of \$1,000,000*.). If you are unable to attend, you can sublease your space but approval must be received from Event Coordinator for sublease. Sorry, no refunds if you are unable to attend.

Thank you for completing this application form and for your interest in partnering with us.