

Scare On The Square

Vendor Registration

October 21st 2017

All Vendors MUST:

- Complete and sign application, including payment to “Scare On The Square”.
- Provide a brief description of booth activity (give away/information/items to sell, etc.).
- Vendors are responsible for their own stands, tables, tent, and chairs. Access to electricity is limited and is on a first come first serve basis otherwise it will not be provided.
- Be responsible for their own insurance policies—Food vendors must be in complete compliance with all local and state health department regulations. A limited number of food vendors will be accepted.
- Be responsible for collection and reporting any applicable taxes.
- All vendor booths should be attractive from all sides and not distract from any neighboring booths.
- All vendors are responsible for disposing of their garbage and clean up. Vendors are responsible for any/all damage to property.
- Non-Profit Organizations will not be charged to participate if documentation with Tax ID# is provided.
- Other vendor booths will have a \$35.00 booth fee. No refunds will be given. Proceeds will be presented to the Grayson County Community Alliance Food Pantry within one month of the festival.

Setup/Teardown

Vendors can begin setup at 1:00 p.m. Teardown time can be any time after the festival. Vehicles can not enter the square until the public has left. If vendor leaves before festival ends belongings must be carried/wheeled out.

If you would like to reserve a spot please return the registration form below by mailing:

Scare On The Square, 2373 Elizabethtown Rd Leitchfield, KY 42754 or fax to 270-259-5080.

You will be contacted to confirm your reservation. The deadline to register is Friday, October 6, 2017.

For more information please call Jason Watson at 270-589-7817 or Nick Ramsey at 270-230-3969.

Participants shall indemnify, defend, and hold harmless the Scare On The Square, the City of Leitchfield, directors and volunteers for any and all claims arising out of the vendor booth. This includes, but is not limited to, all attorney fees, damages, expenses, and any other related costs both direct and indirect.

Business/Organization Name: _____

Contact Name: _____ Phone: _____

Address: _____

E-Mail: _____ Is booth non-profit? If yes, provide documentation

Description of Booth: _____

Signature

Date

For Official Use Only:

Date Submitted: _____ Cash: _____ Check# _____ Non-Profit: _____

Contact For Setup: _____

Notes: _____
