

## EVENT DATES May 26 & 27, 2018

| Date Recvd: |  |
|-------------|--|
| By:         |  |
| Pymt:       |  |
| Ins?:       |  |
| Note:       |  |
| Booth:      |  |

= \$450

## **BOOTH APPLICATION 2018**

| COMPANY NAME   | ME:CONTACT NAME:   |  |   |  |  |
|--|--|--|---|--|--|
|  |  |  |   |  |  |
|  |  |  |   | ·  |  |
| PHONE#:  | CELL:  |  |   |  |  |
| EMAIL:   | WEB:   |  |   |  |  |
| Briefly d  | escribe your exhibit and/  | or special needs. If fo  | ood services, list items  | S.   |  |
|  |  |  |   |  |  |
|  |  |  |   |  |  |
|  | Please check the catego  |  |   |  |  |
| Arts/Crafts  | Food Services  | Commercial   | Rides/Exhibit   | Other  |  |
|  | IMPORTANT  | NOTES ABOUT THE  | OHOW.   |  |  |
| 2. ALL VENDO event. Please write a Cleaning deposit is 3. NOTICE TO 1290) will come to in checking for food sa 4. ICE CAN BE  Mail Boots                               | ewed such as canned soda, to a please refer to the approval a separate check for cleaning due, no later than, the time fin the spect vendors during the every fety and sanitation compliance.  PURCHASED ON SITE. An Interpretation, Payment and the will be based on a first payment. | letter when received.  ning deposit, which will be deposit (check will be retual payment is made on confealth Department Inspect nt. Please bring the state e.  CE VENDOR will be availand Proof of Liability In | be refunded if the space is urned to you the week afte ntract.  tor, Jan Smith (Phone num or county permit that you hable for convenient ice pure asurance no later than is, and will not be process. | left clean after the rethe event is over).  The event is over).  The event is over).  The event is over).  The event is over). |  |
| **Evhibita   |  |  |   | arne**   |  |
| **Exhibitor must provide own generator, electrical cord, equipment, tables, chairs, tarps**  |  |  |   |  |  |
| Those setting up 2 different booths will be treated as a separate booth and paid as separate booth.  SETUP TIME FOR VENDORS WILL BE: Friday 9AM – 6PM; Sat/Sun 6AM-9AM |  |  |   |  |  |
| AIRSHOW HOURS: SAT will be a practice day with less attendees; 9AM – 6PM & SUN; 9AM – 6PM  |  |  |   |  |  |
| Total Amount Encl  | osed (non-refundable): 10  | X 10= \$225 No<br>X 20 = \$300   | on Food Booth   | = \$200<br>= \$325   |  |

Please make checks payable to: Breckenridge Chamber of Commerce
Send Application, Insurance and Payment to: PO BOX 1466, Breckenridge, Texas 76424

20 X 20 = \$375

Upon receipt of your <u>application</u>, <u>check</u> and <u>proof of Liability Insurance</u> you will receive a contract confirming your request. All additional information will be provided in the contract and approval letter you receive. If you have any other questions call the Vendor Coordinator – Patience Bruton at the Breckenridge Chamber of Commerce (254) 559-2301 or email airshow@breckenridgetexas.com