

## **Vendor Application**



## APPLICATION AND FEE NEEDED BY MARCH 31ST TO RESERVE YOUR SPOT

Dusiness Name.		Contact Name:	
Phone No:	Email: _		
Mailing Address:			
City:	State:Zip co	ode:TOTAL enclosed:	
Vendor Hours: <u>Setup</u> : Beg	ins @ 9:00am on Fri <u>Event</u> : F	Fri 12:00-10pm Sat: 9:00am-10pm	Sun: 9:00am-2:00pm
Booth Amount: 10	x10 w/o electricity \$50.00	10x10with electric	ity \$60.00
20:	x20 w/o electricity \$100.00	20x20with electric	ity \$110.00
ENTRY FEE IS NON-REFUNDABLE UNLESS THE EVENT IS CANCELLED			
If selling food, please make so	ure you have obtained a Food Ha	andlers and an Aransas County Health [	Department card.
	• •	olunteers responsible for any claims, is t weather or any other unforeseen mat	
I have read and agree with th	e Rules and Regulations as state	ed in the application and Guidelines.	
Signature:		Date:	

For more information please contact Ronnie Medina at 361-557-1051 or Tim Sparks at 512-629-3259

Make all checks or money orders payable to Boys and Girls Club of Aransas County and mail in with this form to Boys and Girls Club of Aransas County, c/o Ronnie, P. O. Box 1165, Rockport, Texas 78381.

**VENDORS, MUSIC, KIDS ACTIVITIES AND MUCH MORE!**