

Contact Name		
Business/Organization Name		
Mailing Address		
City	State	Zip Code
Email Address		
Website Address (if applicable)		
Booth Description: In order to better identify vendors' boo and the items you plan to display, distr		lease give a brief description of your booth vent.
Electrical Needs:		
Application Checklist		
Completed application form.		Office Use Only:
Complete description of all ve	endor/exhibitor items.	Date Received
Signed and dated application/	contract.	Туре
Certificate of Liability Insurance	on (for food wonders only)	Insurance
	ice (for food vendors only)	Other
		Notes:
Return application/contract to: Wagfest 2049 Badin Rd., Albemarl should be directed to: 704-983-7729	e, NC 28001 Any question	s
General Release: The undersigned doc County Humane Society from all mann in equity from any loss or damage to p festival, its agent, representatives, or e- information in the Wagfest application	ner of actions, suits, damages roperty of the undersigned wi mployees. I hereby affirm the	claims, and demands whatsoever in law hile in possession or supervision of the at I have read all instructions and
Signature	Date	