



## Vendor Application Form

Event Name- "A Greenville Christmas"

Event Date- December 14, 2024

**Please complete the form below and send by Email or US Postal Mail:**

<b>Email:</b>	theheartofgreenvilleinc@gmail.com
<b>Mail:</b>	P.O. Box 862 Greenville FL 32331
<b>Phone:</b>	850-973—0362—Calvin Malone

### Vendor Fees:

Educational/Health Screener Service/Table (Community Partners)	No Charge
Informational Table (Non-Profit Organizations/Businesses)	\$25.00
Jewelry/Purses/Homemade Goods/Crafts etc.	\$50.00
Food Vendors (BBQ, Seafood, Hamburgers, Chicken, etc.)	\$100.00
Additional for Electricity	\$25.00

Fees are **Non-Refundable**

**November 30, 2024**, will be the cut-off date for vendors to register.

## Vendor Information

Organization/Business:	
Contact Name:	
Address:	
City/State/Zip code:	
Phone:	Repeat Vendor: Yes_____ No_____
Email address:	

**Product Information: (Please provide a brief description about your product. This information may be used to detennine vendor space/cost/marketing.)**

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## Release of Liability

In exchange for participation in “A Greenville Christmas”, organized by The Heart of Greenville LLC and/or use of the property, facilities, and services of The Town of Greenville, Florida, I agree for myself and my heirs/designee(s) to the following:

1. I agree to observe and obey all written audio: verbal rules provided by The Heart of Greenville LLC or representatives/agents of The Heart of Greenville LLC, or The Town of Greenville, Florida.
2. I recognize that there are certain inherent risks associated with the above-described activity and I assume full responsibility for any personal injury to myself and my heirs/designee(s) and further release and discharge and hold harmless The Heart of Greenville LLC and its officers/agents, as well as the Town of Greenville, Florida for any injury, loss, or damage.
3. I agree to indemnify and defend against all claims, causes of action, damages, judgements, costs, or expenses including attorney fees and other litigation costs, which may arise from my participation in “A Greenville Christmas”.
4. I agree to pay for all damages to the facilities of The Town of Greenville, Florida caused by myself or any of my agent’s/employee’s negligent, reckless, or willful actions. No vulgar or profane music allowed during the Heart of Greenville Christmas.
5. Any legal or equitable claim that may arise from my participation in “A Greenville Christmas” shall be resolved by the application of Florida Law and Jurisdiction shall be Within Madison County, Florida.

**I have read this release and understand its contents.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### For Office Use Only:

Date Application Received:	
Vendor Approved:	Yes: _____ No: _____
Vendor Space Assigned:	

