

Arab and Chaldean Festival  
 2019 Organization and Commercial Contract  
 Space # \_\_\_\_\_

Dry Goods Vendor Application (Upstairs Only)

Name of Organization \_\_\_\_\_  
 Name of President \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Work \_\_\_\_\_ Fax \_\_\_\_\_  
 Email \_\_\_\_\_

Please list your dry good items you wish sell, along with other items you wish to see at the festival being held on July 27th and 28th, 2019.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_  
 5. \_\_\_\_\_ 6. \_\_\_\_\_ 7. \_\_\_\_\_ 8. \_\_\_\_\_

**PLEASE NOTE THE FOLLOWING:**

It is very important that we agree to fulfill all the requirements set forth by the Arab & Chaldean Festival policies, the Board of Health policies and the City of Detroit policies at all times.

To help us plan the allocation of space at the Festival, your decision will be final upon receipt of this form. This form must be received no later than June 25, 2019.

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

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**TOTAL COSTS:**

<b>Space Rental 10'x 10'</b>	
<b>Consumer Affairs License</b>	
<b>Parking Tickets for two days</b>	
<b>Total</b>	

Date Paid \_\_\_\_\_ Amount Paid \_\_\_\_\_ Check Number \_\_\_\_\_

MAKE CHECKS PAYABLE TO:  
 Arab and Chaldean Festival  
 7234 Oakwood Drive  
 West Bloomfield, MI 48322  
 Tele/Fax: (248) 960-9956  
 E-mail: aacfestival@yahoo.com  
 Website: [www.arabandchaldeanfestival.com](http://www.arabandchaldeanfestival.com)