

Arab and Chaldean Festival
2020 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 25th and 26th, 2020.

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 20, 2020.

Signature _____
Date _____

TOTAL COSTS:

Space Rental 10'x 10'	
Consumer Affairs License	
Parking Tickets for two days	
Total	

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