

Market Trail Days 2018

Castroville Houston Square
Vendor Application

Contact/Business Name: _____

Address: _____ City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____ Web Address: _____

TX Sales Tax Number: _____ (must attach copy to application to be assigned a space)

***Arts, Crafts, Vintage & Food Booth:** \$25 per booth per date ***Farmer's Produce Booth:** \$10 per booth per date

CIRCLE YOUR DATE(S): March 10th June 09th September 8th

Spaces are reserved ONLY upon receipt of payment. If you would like to have your same space as last Market Trail Days then payment is due 30 days before the event... otherwise we would like to have payment and applications a full week before the event.

Prices are subject to change for future events.

I Request (check one box) 1 booth space or 2 booth spaces (Each booth approx. 12' x 12')

Amount Enclosed: \$ _____ (Make checks/ money order payable to: Castroville Area Chamber of Commerce)

Description of products to be sold: **ALSO** Please enclose or email two (2) different photos of items to be sold

***If you have any special needs, please note them on the application or separate sheet of paper.

I hereby release the Castroville Area Chamber of Commerce and any and all of its members from any responsibility for any injuries to me or my employees and for any loss or damage to personal property while participating in the Market Trail Days Event. I also recognize and agree that the Chamber and its representatives are in no way responsible for any action of other vendors or their helpers or employees while in the Market Trail Days Event. I have read and understand and accept all provisions of this letter of agreement and rules and regulations and will abide by all requirements of the Castroville Area Chamber of Commerce. I also understand that there will be **no refund of vendor fees** if I am unable to attend.

Vendor Signature

Date

VENDOR CHECKLIST: (without this list complete we will not issue you a booth).

- ___ Completed and Signed Application.
- ___ 2 non-returnable photos of items to be sold/or emailed
- ___ Payment for booth.
- ___ A Copy of your Texas Sales Certificate.
- ___ A Copy of your Texas Agriculture License (if selling plant products)
- ___ A signed copy of the Rules and Regulations.
- ___ Health Certificates needed if you are a Food
- ___ Current Texas Certified Food Handlers Certification if selling home baked goods, candy, jams, jellies, etc. HB970

FOR OFFICE USE ONLY:

Date received: _____ Amount paid: _____ Cash: _____ Check: _____ CC: _____
Accepted: _____ Rejected: _____ Assigned Booth(s): _____ Date informed: _____