



COLFAX, INDIANA - OLE HICKORY DAYS FESTIVAL
2009 - AUGUST 7, 8, & 9

VENDOR APPLICATION

NAME(S): _____

BUSINESS NAME (IF APPLICABLE): _____

ADDRESS: _____

CITY: _____ STATE/ZIP: _____

PHONE: _____ CELL: _____

E-MAIL: _____

DESCRIBE BUSINESS OR PRODUCT

(ART, CRAFT, FOOD, GAME/ENTERTAINMENT, COMMUNITY, LOCAL, OTHER)

SINGLE BOOTH SPACE = 20' X 10'. YOU MAY REQUEST MORE THAN ONE SPACE.

REQUEST # OF BOOTH SPACES

SINGLE SPACE (NO ELECTRICITY) @ \$20.00 X _____

SINGLE SPACE (WITH ELECTRICITY) @ \$40.00 X _____

PAYMENT DUE WITH APPLICATION

MAKE CHECK PAYABLE TO: OLE HICKORY DAYS

MAIL TO: OLE HICKORY DAYS, 111 E. MIDWAY, COLFAX, IN 46035

INFORMATION: (765) 894-7280 or tracy.rose@hotmail.com

VENDORS ARE ASKED TO EXHIBIT ALL THREE DAYS, ALL HOURS OF OHD FESTIVAL. FRIDAY SET UP TIME BEGINS 8:00AM TO 4:00PM. VENDORS ARE ALSO ASKED TO KEEP THEIR BOOTH AND AREA CLEAN AND NEAT FOR THE SAFETY OF EXHIBITORS AND THE PUBLIC. VENDORS ARE RESPONSIBLE FOR PROVIDING ALL THEIR OWN EQUIPMENT AND SUPPLIES (TABLE, CHAIRS, DISPLAYS, PROPS, ETC.)

I UNDERSTAND THAT "OLE HICKORY DAYS" AND/OR THE TOWN OF COLFAX WILL NOT BE HELD RESPONSIBLE FOR ANY LOSS, DAMAGE, DEFACEMENT OR DESTRUCTION OF ANY PROPERTY DISPLAYED BY THE VENDOR, NO MATTER HOW IT IS CAUSED. THIS ALSO INCLUDES PERSONAL INJURY. "OLE HICKORY DAYS" AND THE TOWN OF COLFAX PROVIDES NO INSURANCE ON THE VENDOR OR AGAINST THE ACTS OF OMISSIONS OF THE VENDOR, ITS AGENTS OR EMPLOYEES. ALL INSURANCE FOR PERSONAL PROPERTY, PUBLIC LIBABILITY AND PERSONAL INJURY MUST BE CARRIED BY THE VENDOR.

SIGNATURE _____