

2016 REARDAN MULE VENDOR/EXHIBIT ENTRY FORM

We invite you to participate in the Annual Mule Days celebration on the first Saturday in June. The craft fair takes place in the Reardan City Park to give plenty of room for booths and more aisle space for those attending. We do everything possible to make your visit a pleasurable and profitable experience. Thousands of spectators, event participants and visitors look forward to this special event and will want to know about your products. For questions contact: Chairman Joyce Nelson 509-483-0059, email joycenelson81889@yahoo.com.

MAIL ENTRY TO: Joyce Nelson, E 818 Olympic, Spokane WA 99207. Email: joycenelson81889@yahoo.com

OWNER NAME: _____ BUSINESS NAME: _____

PHONE NUMBER: _____ FAX: _____ E-MAIL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

REPRESENTATIVE: _____ TAX #: _____
(Individual Responsible & Manning Booth)

TYPE OF BOOTH:

- Commercial
- Food
- Craft

Booth Fees	
Electricity (\$10)	\$ _____
Commercial/Food Booth (\$75)	\$ _____
Craft Booth (\$45)	\$ _____
Each Additional Booth (\$40)	\$ _____
Total Amount Booth Fees	\$ _____

List Items to be Displayed:

T-SHIRT

Special custom Annual designed t-shirts are available. A limited number of t-shirts will be available during show days. Shirts are optional and are available on a first come, first serve basis (sizes based on availability). Please circle the size(s) and amount.

	Small	Medium	Large	X-Large	XX-Large	XXX-Large	TOTAL Shirt Amount
Price	\$11	\$11	\$13	\$13	\$15	\$15	\$ _____

INDEMNITY AGREEMENT

In consideration for the acceptance of my application and their permitting me to participate in the Annual Reardan Mule Days celebration as a Commercial or Non-Profit Exhibitor. I, myself, my executors, my administrators and my assigns forever release all rights to ever make claims on my behalf against the Reardan Mule Days Association, its Board of Directors, Officers and/or Town of Reardan. I am aware that there is an element of risk involved with this event and I will accept responsibility for any injury or property damage for which I might incur. This is my written statement that I will assume and pay for my own property damage repairs and my own medical emergency expenses in the event of injury, accident, illness, or loss of property while traveling to or from or while participating in said Reardan Mule Days. I have read the above statement and understand it and my signature below confirms it's acceptance.

SIGNATURE

DATE

PARENT OR GUARDIAN (IF UNDER 18)

DATE

ALL BOOTH CONTRACTS MUST BE SIGNED BY THE PERSON RESPONSIBLE FOR YOUR BOOTH(S) AND RETURNED WITH REQUIRED FEES