RELAY FUN DAY

SPONSORED BY RELAY FOR LIFE

Booth Rental Application:

DUE BY: May 1, 2015

Event Information:

When: Saturday, May 16, 2015 **RAIN OR SHINE**

Time: 10:00am - 5:00pm

BOOTH MUST REMAIN OPEN TILL AT LEAST 4:00 pm

Set up: Saturday, May 16, 2015, 8:00am -9:45are (must be set-up by 10:00 am .no later)

Where: Southbridge Town Common (Between Crystal & Mechanic St) Southbridge, MA.

Booth Information: Booth space is 12'x12' (more than 1 space can be rented)

Booth locations will be pre-assigned on a first come, first served basis

Fees:

Merchandise / Craft Vendor	$ 50.00
Non-Profit/Civic Association selling Merchandise	$ 25.00
Non-Profit, Non-Selling Civic Association	Free
Road, Street, Avenue and Parkway Sponsors	Free
Ride & Activity Vendors	$50.00
Electricity per outlet	$15.00

There are a limited number of electrical outlets they will be pre-assigned on a first come basis.

NOTE: Fees are NON REFUNDABLE upon acceptance to the event

Requirements:

Send payment and completed application by April 30, 2015

You are responsible for providing your own set ups including any rain covers & tables.

Free raffles are permitted but no raffles charging a fee will be permitted.

The Relay for Life Fun Day Committee has the right to refuse any vendor. We will do our best to not duplicate vendors of the same brand merchandise.

FOOD VENDORS

Food Vendor Fee: $50.00
Electricity Fee: $15.00 (per outlet)

Any vendor selling or offering any type of FOOD must speak to the Southbridge Board of Health concerning food health requirements and permits. **All permits and certificates** shall be posted in a visible area while fair is open. **Contact: 1-508-764-4252**
A copy of your serv-safe certificate, allergen awareness certificate and BOH certificate shall be included in your application. You will not be allowed to set up if we do not have these papers.

I understand that all paperwork and payments must be given to Relay for Life Events Planning before set up. **Unfortunately there will be no set up without payment and paperwork. Company / Individual**

Name:_____ **Telephone:**_____ **Email:**_____

Mailing Address:_____

Type of Vendor / Product:_____ _____**Number of Spaces:**_____

Power: Y_____ **N**_____ **# of outlets**_____**(x$15.00 ea.) I have enclosed my check for: $**_____

Signature:_____ _____**Date:**_____

For questions on being a vendor, sponsor and mailing applications please contact / mail to:
Kimberly Desy 117 Shepard Rd Sturbridge, MA. 01566 (774)-230-3653 tropicaltreatz@yahoo.com