

# 2017 POOLESVILLE DAY

SEPTEMBER 16, 2017 10:00 am -4:00 pm

## ARTISAN EXHIBITOR APPLICATION

EXHIBITOR CATEGORY	EARLY BIRD FEE PER SPACE <b>Deadline: June 9<sup>th</sup></b>	FEE PER SPACE <b>June 10<sup>th</sup> – Aug. 16<sup>th</sup></b>
<input type="checkbox"/> For-Profit	\$80.00	\$100.00
<input type="checkbox"/> PACC Member	\$60.00	\$80.00
<input type="checkbox"/> Non-Profit *	\$40.00	\$60.00
<input type="checkbox"/> Service (police, & fire)	No Fee	No Fee
<input type="checkbox"/> Using own property	No Fee	No Fee

-Booth spaces are 12'x12'. Fees include booth space and listing in print and electronic advertising

-Exhibitors must supply their own tents, tables, chairs and signage. Festival takes place rain or shine!

-\*Non-profit organizations are Scout groups, churches and volunteer groups ONLY.

Please fill out the following information to participate in Poolesville Day. (Please print) **Email is main form of contact.**

Name of person or group: \_\_\_\_\_

Contact person: \_\_\_\_\_

Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email address: \_\_\_\_\_ Website: \_\_\_\_\_

Type of Activity/Products: (list all products to be sold) (**Note: No silly string, shaving cream, or Bang snaps (also known as Throwdowns, snap-its, poppers, pop-its, snappers, whip'n pops, whipper snappers, fun snaps or snap'n pops)**)

Were you an exhibitor at Poolesville Day 2016? (Please circle) Yes No If yes, would you like the same space? Yes No

Are you interested in being a Poolesville Day Sponsor (Please circle) Yes No

**Applications must be received by June 9<sup>th</sup>, 2017 in order to guarantee same space**

**Payment must be made in full with the application. Payments must be received by August 17, 2016.**

Cash or Checks only.

Please make all checks payable to: Poolesville Day Committee, Inc.

Mail payment and application to: Poolesville Day Committee, Inc., P.O. Box 4, Poolesville, MD 20837-0004.

### Refund Policy:

Full refunds will be given to exhibitors who cancel by written letter 30 days prior to festival day.

Cancellations must be made in writing/mailed to: Poolesville Day, P.O. Box 4, Poolesville, MD 20837

### Returned Check Policy:

A \$25 fee will be charged for any returned checks by Vendor's bank.

Please read and sign the second page. \*\*\*\*DO NOT SUBMIT WITHOUT SIGNED SECOND PAGE\*\*\*\*

[www.poolesville.com](http://www.poolesville.com) / [poolesville@yahoo.com](mailto:poolesville@yahoo.com) / 301-349-2123

### **PAYMENT PROCEDURE**

**Payments must be made in full with application.**

**Applications must be received by, August 16<sup>th</sup>**

**No additions after Sept. 9<sup>th</sup>**

# **2017 POOLESVILLE DAY EXHIBITOR AGREEMENT**

By signing below, I as the recognized representative for the person/group filling out this application, hereby understand and agree to the following:

1. If I am selling any type of food or beverage--even bottled water or prepackaged goods--I must have a permit from the Montgomery County Health Department (240-777-3986) and a covered area from which to prepare and serve food. Inspections will be given onsite by a Health Department representative. *I will provide a copy of the permit to the Poolesville Day Committee, Inc. prior to the date of the festival.*
2. I must supply my own tents, tables, chairs, signage, power and all other logistics (unless agreement is worked out with the Poolesville Day Committee in advance for special circumstances).
3. I am responsible for collecting sales tax and filing any required documentation. For information on sales tax, call the State of Maryland at (800) 492-1751.
4. If I am planning any type of raffle (selling chances at winning a prize), I must have a permit from the Montgomery County Department of Health and Human Services (240-777-3833).
5. On behalf of my group, and myself I hereby waive any and all liability that may arise on the part of Poolesville Day and/or its Committee, Sponsors/Co-Sponsors regarding a personal injury or damage to equipment occurring on Poolesville Day.
6. **I understand that the Poolesville Day Committee, Inc. (PDC) has the final authority on vendor participation, location and the types of acceptable food and activities.** The Committee will do its best to duplicate correctly all participant information, but is not responsible for errors or omissions.
7. I understand that I must sell only those products or provide only those activities that I have listed on the application. The refusal to do this could result in the Committee closing down my booth.
8. I consent to having my name given to all government organizations that request a list of vendors. Failure to consent means denial of my application.
9. I understand that all vendors must remain set-up throughout the entire festival and may not leave early without prior permission from the Poolesville Day Committee Chairperson, Faith Etheridge or Exhibitor Chairperson, Cathy Bupp.
10. I give permission to the Poolesville Day Committee, Inc. to use any photographs taken for marketing purposes in the future. APPLICATIONS MUST BE RECEIVED by AUGUST 16th.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**www.poolesvilleday.com / poolesvilleday@yahoo.com / 301-349-2123**