

Pottsboro Frontier Days in Friendship Park

Friday evening and Saturday-
September 26 and 27, 2008



Frontier Day will be held in Pottsboro's Friendship Park. The carnival and food vendors are to be set up on Friday, Sept. 26, 2008, and operational from 4:00 p.m. until 8:00 p.m. All other vendors are encouraged to be open on Friday, Sept. 26, 2008, but must be operational all day Saturday, Sept. 27, 2008 from 9:00 a.m. until 5:00 p.m.

BOOTH APPLICATION

Group or Individual Name: _____
Contact Person: _____
Street or P.O. Box Number: _____
City, State, Zip Code: _____
Phone Number: _____ FAX Number: _____

TYPE OF BOOTH

Arts & Crafts Information Food Entertainment
 Public Service Sales Other (please specify)

*Booth application deadline is Aug. 29, 2008. City ordinance prohibits vendors or fundraiser activity along highway or within the right-of-way.

PLEASE READ AND SIGN THE LEGAL DISCLAIMER ON REVERSE AND RETURN THIS FORM WITH YOUR CHECK OR MONEY ORDER.

Please indicate what size area or facility you will need:

10' X 10" \$40.00 10' X 20' \$60.00 20' X 20' \$75.00
 Electricity \$10.00-available for food vendors only

**** PLEASE PROVIDE YOUR OWN EXTENSION CORDS.***

Vendors are required to clean their booth area following event. Maps and further instructions will be sent the week prior to the event. The Frontier Day Project and the Pottsboro Area Chamber of Commerce do not carry insurance against property loss or damage for individual vendors. Each applicant is expected to cover his/her own insurance needs.

POTTSBORO AREA CHAMBER OF COMMERCE
P.O. Box 995
Pottsboro, TX 75076

903-786-6371

*****SEE REVERSE***

Please read and sign below acknowledging that you have read and understand the following terms and conditions of exhibiting at Frontier Day

1. I understand that: (1) booth spaces are approximately 10'x10', 10'x20' or 20'x20' and I must adhere to those space dimensions (2) booth assignments will be made by the Chamber and will be "first come, first serve" based on when my signed registration is received; (3) there are very limited spaces to accommodate special requests for electricity (for food vendors only).
2. I understand if I request electricity, I must return a \$10.00 check with this form.
3. I will leave my booth space clean at the end of the day; and place all trash in the nearest trash can.
4. I understand that I am responsible for compliance with all applicable laws and regulations, including: (1) laws governing sales tax (2) and Health Department requirements for food handling. I acknowledge that the Chamber is not responsible or liable for my compliance with any laws or regulations.
5. I understand that I must supply all booth materials, displays, racks, tables and/or chairs I might need.
6. I understand that check-in time begins at 12 noon, September 26th, and that festival hours are from 4 p.m. to 8 p.m. on Friday, and 9 a.m. to 5 p.m. on Saturday for all vendors. **OVERNIGHT SECURITY WILL BE PROVIDED.** I must be packed up, cleaned up and off the property at Festival Park by 6:00 p.m. We will have live entertainment Friday night.
7. I understand that live animals, flammables, explosives, firearms/weapons, illegal substances of any kind, loud music, offensive material, and/or offensive behavior **ARE NOT ALLOWED IN BOOTH SPACES!**
8. I understand that Frontier Days will take place on Friday and Saturday, September 26th and 27th, **RAIN OR SHINE!**
9. **BOOTH RENTAL IS COMPLIMENTARY TO POTTSBORO CHAMBER MEMBERS.**

I and the organization listed below: (1) agree to hold the Pottsboro Area Chamber of Commerce and any of its members, directors, officers, employees and volunteers, as well as the City of Pottsboro harmless; (2) and further agree to indemnify the same as a result of any negligence or any damages caused by the below signed or the organization for which the below signed is an authorized representative; (3) and further agree to pay for any damages caused by said organization; (4) and further agree to defend same.

I hereby agree to abide by all of the terms and conditions noted above, and represent that I am authorized to sign this application and registration on behalf of my organization.

Printed Name: _____ Signature: _____

Title: _____ Date: _____

PLEASE RETURN COMPLETED AND SIGNED FORM AND CHECK TO THE POTTSBORO AREA CHAMBER OF COMMERCE, P. O. BOX 995, POTTSBORO, TX 75076. FOR INFORMATION, CALL 903-786-6371.