



Honeybee Festival
Food Vendor Application
June 2, 2018
 City of LaFayette, Georgia 30728

Business Name _____ Artist Name _____

Mailing address _____ City, State, Zip _____

Business phone _____ Cell Phone _____

E-Mail Address _____ Website _____

A copy of your menu with prices must be included (Be specific "chicken" does not give us enough information)

List two festivals in which you have participated in the last 18 months.

1. _____ 2. _____

Did you participate in our festival last year? Yes / No If yes, do you want your same spot? Yes / No

Will you leave at optional time or stay for the concert? Leave / Stay

If you have a Food Trailer or Truck, what is the overall length including tongue? _____ft.

If Trailer or Truck, which side do you serve out of? Right / Left

APPLICATION FEES:

Early Bird Fee (Before April 1, 2018)

- _____ \$50 Deposit (Separate Check)
- _____ \$125 Single Booth (12x12)
- _____ \$175 Double Booth (12x24)
- _____ \$225 Triple Booth (12x36)
- _____ \$50 Add Electricity
- _____ \$ TOTAL AMOUNT DUE

After April 1, 2018

- _____ \$50 Deposit (Separate Check)
- _____ \$150 Single Booth (12x12)
- _____ \$200 Double Booth (12x24)
- _____ \$250 Triple Booth (12x36)
- _____ \$50 Add Electricity
- _____ \$ TOTAL AMOUNT DUE

- * Booths are based on 12'x12' per space
- * \$50 Deposit (Separate Check) please write separate check for deposit so it can be returned to you at end of event
- * All information including the festival rules can be found at www.myhoneybeefestival.com

If I am selected to be an exhibitor for the 2018 LaFayette Honeybee Festival, in consideration of my selection, I release and hold harmless and indemnify the City of LaFayette, its officers, elected officials, employees, agents, servants and volunteers, from any and all liability, loss or damage including, but not limited to, personal injury and property damage in connection with the festival, which is caused by me and my agents, servants and employees. By signature below I confirm that I have read and understand all rules and regulations set forth by the LaFayette Honeybee Festival and that I will comply with all rules and regulations.

Signature _____ Date _____

Payment in full is required with application.

Mail to: Honeybee Festival C/O City of LaFayette * PO Box 89 * LaFayette, GA 30728

For office use only:			
Amount Paid _____	Payment Receipt Date _____	Payment Type _____	Check # _____
Accept _____	Decline _____	Booth # _____	