

Maiden's 2017 Fall Festival Vendor Registration

October 7th, 2017

Please Return to: Fall Festival Vendors
c/o Town of Maiden
19 N. Main Ave
Maiden, NC 28650

Or By
Email:sweichel@maidennc.gov

Group Name: _____ Non-Profit: ___Yes ___No

Contact Person(s): _____

Contact Phone: (_____) _____ Alt. Phone: (_____) _____

Mailing Address: _____

Email Address: _____

If a 10' X 22' (size of a parking space) will not be sufficient, please request additional space at \$25.00 per space.

How many spaces are you requesting: _____ x \$25.00 = \$ _____

Spaces are available on a first come, first serve basis.
Please make all checks payable to the Town of Maiden

Items to be sold (Yard sale items will not be allowed!):

If applicable, manner by which food will be heated or cooked: _____

Are requesting water? ___Yes ___No Are you Requesting Electric? ___Yes ___No

We make every attempt to provide water and electric service to spaces,
but cannot guarantee that they both will be available.



TO BE COMPLETED BY TOWN OF MAIDEN STAFF

Tent Size _____ Vendor Registration Number: _____

Form Submitted on: (Date) _____

Total Fees Due: _____ Paid By: Cash: _____ Check #: _____

Vendor Contacted by (Name) _____ on (date) _____