

FOUNDER'S DAY

Vendor Registration Form

Saturday, May 11, 2019



Contact Person: Adele Collette (918) 530-8132
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This form is for all vendors, churches, organizations, and persons selling products or services or providing public entertainment on Main Street, Saturday, May 11, 2019. Entry deadline is Saturday, May 4, 2019.

Name of Organization/Vendor _____

Mailing Address _____

Contact Person _____ Phone _____

Check all of the following that apply to you or your group:

_____ \$25.00 Business or Organization for a 12 x 12 space
_____ Number of spaces needed

_____ Need electricity

_____ \$10.00 Nonprofit Organization (church, etc. with a 501(c)(3) status)

_____ We will be using a generator.

Have you or your group set up a booth/event for Founder's Day in the past? _____

Describe what you will be selling/providing to the public on Founder's Day _____

Size of concession trailer/description of space needed _____

Other special needs _____

Mail the completed forms and check to the Chamber, P. O. Box 525, Locust Grove, OK 74352, or drop them off at the Chamber office, 114 E. Main or Wonder City Coffee, 118 E. Main.

The Founder's Day Committee reserves the right to accept or deny any application.

I hereby agree the above is/are eligible as entered. I agree to release and hold harmless the management or any of its members or agents, and/or the owners or managers of the grounds or location where this event is held from any loss, damage or injury resulting from participation of above entry in this event. My signature on this application agreement confirms my understanding of the rules and liabilities. (If participant is under 18 years of age, a parent or guardian must also sign.)

Signature _____ Date _____

LocustGroveOklahoma.com:
You can also register and pay online!

RELEASE AND INDEMNIFICATION

Dear Vendor:

This page must be signed and returned with your registration application. Failure to do so will result in an incomplete application and you will not be allowed to set up your booth (vendor) or participate in the parade until all paperwork is completed.

I,(name)_____,with
_____(business name),
hereby agree that I will not be selling any items that will create a mess or release an offensive odor, like cap guns, spray paint, smoke bombs, flatulent bags, shock toys, etc., and fireworks. If these items or similar items are found in my booth, I will be asked to leave the area immediately and I will not be refunded any monies.

Signature_____Date_____

The Locust Grove OK Area Chamber of Commerce reserves the right to cancel or re-schedule the Locust Grove Founder’s Day Parade due to inclement weather, or for any reason that would jeopardize the health and safety of the public.

INDEMNIFICATION AGREEMENT

I/we understand that participation in the Locust Grove OK Area Chamber of Commerce Founder's Day Parade activities, including but not limited to the parade, booths, contests and various other activities, is accompanied by certain risks. In consideration for being allowed to participate in these activities, I/we assume the responsibility inherent in these risks. I/we further waive all claims and release the Town of Locust Grove and the Locust Grove OK Area Chamber of Commerce, and all other entities and persons participating in, directing or sponsoring this event, from any and all liability arising from my/our participation in the activities of any/all activities of the Locust Grove OK Area Chamber of Commerce.

The Chamber of Commerce does not carry insurance to cover your personal property or liability. As an independent contractor, you are advised to obtain your own insurance.

I understand that failure to pay any or part of the required sales taxes will result in violation of the Oklahoma state tax laws.

Name of Participant

Age

Signature

Date

Parent or Guardian (if needed)

Date