

For Office Use:

Booth(s) _____

Electric: _____

Water _____

For Office Use:

Paid \$ _____

Cash _____

Check _____

Date _____

Pioneer Days 2015

PITTSBURG, TEXAS

September 19, 2015

Booth Rental/Vendor Rules & Guidelines Contract

Please Print

Vendor Name: _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Booth Category: Food: _____ Crafts: _____ Entertainer: _____ Other: _____**Items for Sale:**

List the items, food or type of entertainment you will be offering:

Booth Space

Please indicate the number of booths you will require. Each booth is 12' wide by 14' deep. If your booth exceeds these dimensions, you will be required to purchase an additional space to accommodate your booth.

_____ 12x14 Booth Space – Day Rental Only (8 a.m. to 4 p.m.) on Main Street

_____ 12x14 Booth Space – Day and Evening Rental (8 a.m. to 8 p.m.) Food Court Only

Electricity

Please indicate how many (in numbers) of the following types of electrical outlets you will require:

110 (30 amp) _____ 110 (20 amp) _____

220 (30 amp) _____ 220 (50 amp) _____ 220 (60 amp) _____

Water

Please indicate whether you will need a water hookup _____ Yes _____ No

Please see other side for fee schedule and signature fields

Fee Schedule: *Early Bird fees are effective until September 6, 2015. After September 6, regular rates will apply.

| | | |
|---------------------|------------------------------------|-------|
| 12 x 14 Booth Space | Early Bird* Commercial Food | \$100 |
| 12 x 14 Booth Space | Regular Commercial Food | \$125 |
| 12 x 14 Booth Space | Early Bird* Arts, Crafts & Novelty | \$50 |
| 12 x 14 Booth Space | Regular Arts, Crafts & Novelty | \$75 |
| 12 x 14 Booth Space | Non-Profit/Church Organization | \$30 |

Additional Booth Fees:

| | |
|-------------------|--|
| Water Usage | \$10 day or \$15 day-evening food booth (per hookup) |
| Electricity Usage | \$10 day or \$15 day-evening food booth (per outlet) |

Please sign below to enter into a booth space lease agreement:

Printed Name of Vendor

Signature of Vendor

Date

Amount Enclosed \$ _____

Please sign below to indicate receipt of the attached copy of the Pioneer Days Rules and Guidelines.

I have read and understand the guidelines set forth in this application and do agree to abide by all rules as outlined. I also acknowledge that I have received a copy of the rules and guidelines for my records.

Signature of Vendor

****ANY APPLICATION RETURNED UNSIGNED WILL NOT BE PROCESSED.**

Please mail or bring your completed application, fees, health department permit (as applies) and certificate of liability insurance (as applies) to:

**Camp County Chamber of Commerce
202 Jefferson Street
Pittsburg, Texas 75686
903-856-3442**