

**GREATER BATH MEMORIAL DAY CELEBRATION
& SMOKIN' ON THE POINT
VENDOR APPLICATION**

Business Name: _____

Contact Person(s): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

*Please attach a summary of menu items that will be sold.

*Upon acceptance, you will be notified of arrival times and location. You are not allowed to drive through the celebration during hours of operation under any circumstances. We ask that you arrive during the allotted set up time and make sure that your vehicles are clear at time of street closure. You will not be allowed to leave the celebration until attendees have been cleared.

*Please provide detailed needs of space, such as size of space needed and any electrical needs you may have. How many amps needed or whether you are self-sustained by generator. Electricity is limited and will be assigned as applications are received by event coordinators. Vendor should bring adequate long heavy-duty extension cords. Food vendors preparing food on site under a tent must have a fire extinguisher and have required permits obtained at Beaufort County Health Department – Department of Environmental Health – 252-946-6048.

***Will you need electricity? Yes NO If so, what amps would you need? _____**

*There is a **\$200 vendor fee for food vendors and a \$100.00 Craft vendor fee** that must be paid in advance of setup. Cash or check will be accepted. Checks should be made payable to **Greater Bath Foundation** and should accompany your application.

NOTE: Make sure all information is complete and include vendor fee along with application. Incomplete applications will not be considered. Locations are assigned on a first paid, first come basis and are placed at the discretion of the Celebration Committee.

Vendors will not hold the Town of Bath, the Celebration participants, directors, volunteers, or employees responsible for claims, losses, fees, damages, or expense. The Celebration will not refund due to inclement weather, government action, strikes or other matters beyond its control. By signing your name below you are stating that you have read the Vendor Application and accompanying information and you and your organization will abide by the rules or risk being removed from the Celebration. Vendor agrees to secure insurance coverage that will cover property damage and personal injury arising as a result of the vendor's action. Absolutely no refunds will be given under any circumstances. We reserve the right to close the Celebration early, if deemed necessary.

Signature of Responsible Party

Date

**Mail to: Greater Bath Foundation, P O Box 7, Bath, NC 27808
Phone Number: 252-943-7033 or 252-413-9517
Email: Elna Lewis at elnalewis@gmail.com for any questions.**