



ESTILL FALL FESTIVAL

VENDOR APPLICATION

Organization Name: _____

Contact Person: _____

Address: _____

Phone: _____

E-Mail: _____

Type of Items to be sold: _____

Check All That Apply:

NON-PROFIT ORGANIZATION: Friday, October 4th _____ Saturday, October 5th _____
(\$60.00 daily or \$110.00 for two days)

PROFIT-ORGIZATION: Friday, October 4th _____ Saturday, October 5th _____
(\$75.00 daily or \$125.00 for two days)

ARTS/CRAFTS: Friday, October 4th _____ Saturday, October 5th _____
(\$75.00 daily or \$125.00 for two days)

ELECTRICITY NEEDED: Yes ____ No ____
(Limited spacing for electricity is on a first come, first serve basics)

WATER NEEDED: Yes ____ No ____
(Limited spacing for water is on a first come, first serve basics)

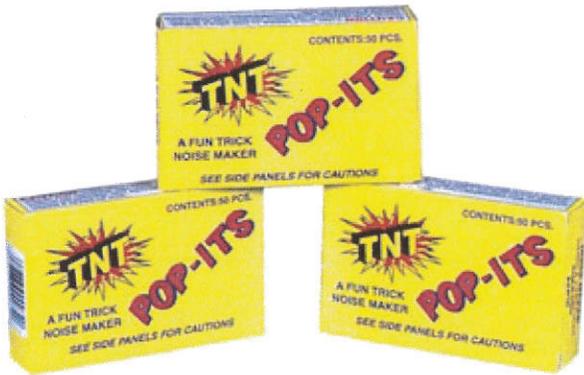
Total Amount Enclosed: \$ _____
(Payments are due by October 2, 2013 by 5:00 PM)

MAKE PAYMENTS TO:

Estill Fall Festival
P.O. Box 415
Estill, SC 29918

(Payment type: Cash, Check, or Money Order)

**THESE ITEMS AREN'T ALLOWED TO BE
SOLD AT FALL FESTIVAL**



NO LASERS

NO LASER GUNS

NO POP-ITS

NO TOY GUNS (THAT LOOK LIKE REAL ONES)