

Green Mountain Fair at Manchester

AUGUST 1ST - AUGUST 5TH

2018 FOOD VENDOR APPLICATION

Vendor Name:		
Mailing Address:		
City, State, Zip:		
Contact Name:		
Business Phone:		
On Site Contact:		
On Site Phone:		
Fax Number:		
Email Address:		
Credit Card Number:	CDC CODE	Exp Date
Billing Address:		

Please list the products and/or services to be exhibited or sold: Space assignments will reference this list. Once a contract is issued, you may not display or sell

additional products or services without the approval of the L.E.A.D. INC.

I, the undersigned, agree to comply with all rules, regulations, guidelines, terms and agreements set forth by L.E.A.D., Inc. I understand that my application fee, once accepted, is non-refundable.

Signature:_____ Date:_____

Print Name:_____

Notes:

- 1. 20% of gross sales for all 6 days \$250 guarantee. Deposit of \$250 must be received with this application .
- 2. Applications must include this form completed in its entirety, the payment, a signed Hold Harmless Agreement and a Certificate of Liability Insurance with additional insured being:
 - a. L.EAD, Inc.
 - b. Dorr Farm
 - c. Town of Manchester

Forms can be faxed to 609-228-6649, emailed to admin@leadrugs.org

Or mailed to:

L.E.A.D. 5 South Main Street Allentown, NJ 08501 Attn: Patty Titen