

**36th Annual Crepe Myrtle Celebration
Festival Application Form
Festival Date: Saturday, September 12, 2009
Downtown Angier 10 a.m. – 5 p.m.**

Application deadline is AUGUST 21, 2009

Mail with payment to:
Angier Chamber of Commerce, P.O. Box 47, Angier, NC 27501

****All applications will be reviewed on a first come, first served basis. The Angier Crepe Myrtle Celebration Committee will attempt to limit duplicated food, so please send in your application as soon as possible. Applications will NOT be processed without payment. ****

APPLICATION MUST BE FILLED OUT COMPLETELY - PLEASE PRINT

NAME OF PARTICIPANT (Contact Person): _____

COMPLETE NAME OF CO: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: (____) _____ - _____ WORK or CELL PHONE: (____) _____ EMAIL: _____

TYPE OF ENTRY: **IF YOUR TENT, TABLE, CANOPY OR GUIDE ROPES EXCEED 10' X 10' YOU WILL NEED 2 SPACES.
FUNERAL TENTS OR 15' x 15' TENTS ARE NOT ALLOWED.**

___ **NON-PROFIT** (Non-Profits are Charities, Civic Associations and Churches)

___ **10x10 \$40.00 (DISPLAY ONLY)** ___ **10x10 \$50.00 (SALES OR RAFFLES)**

(Non-Profit organizations are NOT allowed to give away any food or drink items)

___ **HANDMADE PRODUCTS SALES – (NO FOOD)** (Crafts, etc) ___ **10x10 \$70.00**

___ **COMMERCIAL (INFORMATION ONLY, NO DIRECT SALES)** ___ **10x10 \$85.00**

___ **COMMERCIAL SALES (NO FOOD)** ___ **10x10 \$95.00**

___ **FOOD VENDORS** ___ **10x10** or ___ **10x20** (Please indicate size required) **\$110.00**

___ **POLITICIANS** ___ **10x10 \$85.00**

ELECTRICITY (Call to confirm availability): ___ **110v - \$15.00** ___ **220v - \$25.00 AMPS** _____

COMPLETE DESCRIPTION OF CRAFT/FOOD: List ALL items to be sold. If you sell item other than listed, we have the right to ask you not to sell it:

Note: The Angier Crepe Myrtle Celebration is a family oriented event. We want all who participate to enjoy their day. However, profanity or public displays of anything we deem offensive to any individual or group is strictly forbidden as well as items associated with alcohol, tobacco, weapons, and illegal substances. Thank your for your cooperation, the Angier Chamber of Commerce & Angier Police Dept.

LIABILITY INSURANCE POLICY NAME & NUMBER IF FOOD

VENDOR: _____ (This is required and a copy must be attached).

FOOD VENDORS MUST APPLY FOR A SPECIAL EVENT PERMIT FROM THE HARNETT CO HEALTH DEPARTMENT.

The Town of Angier, Angier Chamber of Commerce, and the Angier Crepe Myrtle Celebration Committee are not responsible for any damage to vehicles, damage or theft of personal property, personal injury, or stolen items.

ENCLOSED IS A CHECK IN THE AMOUNT OF \$ _____ FOR _____ SPACE(S) AND _____ ELECTRICITY

I, the undersigned, have read and agree to abide by the Angier Crepe Myrtle Celebration Rules stated in the attached letter. If accepted for participation, I will uphold the rules and high reputation of this event.

Participant's Signature: _____ Date: ____/____/____

WE RESERVE THE RIGHT TO REJECT OR ACCEPT ANY APPLICATION