



# VENDOR & EXHIBITOR APPLICATION

Event: \_\_\_\_\_ Event date: \_\_\_\_\_ Event timeframe: \_\_\_\_\_

Event location: \_\_\_\_\_ Event contact person: \_\_\_\_\_

Booth set-up timeframe: \_\_\_\_\_ Booth set up by: \_\_\_\_\_

**EVENT GUIDELINES:** Booths must be set up by the designated time and may not be disassembled earlier than the end of the event. Exhibitors must bring and display their materials and resources; alcohol or drug-related products are prohibited. Children aged 12 years and younger are not allowed to work at the booth. One person must always be present at the booth. Park in the reserved vendor parking area only unless unloading and loading. The vendor is responsible for processing all sales transactions and reporting sales tax. Food vendors must provide a Certificate of Liability Insurance.

Cancellation requests must be submitted in writing to the facility by \_\_\_\_\_.

Applications must be approved by the site supervisor to be a vendor or exhibitor at this event.

If application is approved, payment is due by: \_\_\_\_\_ (debit card, credit card, or check)

The event contact person will provide payment arrangement details upon approval notification.

## VENDOR, EXHIBITOR, OR SPONSOR INFORMATION

Name: \_\_\_\_\_ Organization: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\$35 Vendor or  \$35 Exhibitor Spaces needed: \_\_\_\_\_  \$50 Food truck  
(selling goods) (informational) (discounts not allowed)

A \$1 processing fee applies to all Parks and Recreation vendors.

\$10 Senior discount (not for businesses; individuals only ages 50+) **TOTAL AMOUNT DUE: \$** \_\_\_\_\_

Sponsor Contribution: \_\_\_\_\_  
(List service(s), product(s), or monetary amount)

I plan to display or sell the following items (**must be completed**):

Gwinnett County reserves the right to photograph and videotape activities and facilities for promotional purposes. Gwinnett County does not guarantee attendees or sales. Due to limited capacity, submitting this application does not guarantee a reserved space. Payment will be processed if application is accepted and if space is available. By signing, you understand and agree to abide by the information stated on this application. Please make a copy for your records.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ I am interested in being a vendor at future events.  Yes  No

Submit completed application by: \_\_\_\_\_ Email to: \_\_\_\_\_

Or hand-deliver application to: \_\_\_\_\_