

Willow Winter Carnival 2018

Saturday January 27th/Sunday January 28th
Saturday February 3rd

Vendor Application

➤ Vendor

Name: _____

➤ Phone Number: _____ E-Mail

Address: _____

➤ Product Description:

➤ Mark any special needs: Window space _____ Wall space _____ Power _____

➤ Table / Space fee is: \$25.00 per day
*One 6x2.5 foot table and two chairs are provided per space
Booths are approximately 7x7*

➤ Please indicate the days you require and pay accordingly

January 27th Saturday _____ January 28th Sunday _____

February 3rd Saturday _____

➤ Payment is expected by January 20th to secure your space. *TOTAL ENCLOSED* _____

Please make checks payable to **WACO** and mail to: **PO Box 1027 Willow AK 99688.**

For information call: 232-9329

*****VENDOR AGREEMENT*****

I have read and agree to the terms of use as described on the this application form. Further, I hereby RELEASE, HOLD HARMLESS AND IMDEMNIFY THE WILLOW AREA COMMUNITY ORGANIZATION, IT'S OFFICERS, EMPLOYEES AND AGENTS from any and all claims arising out of or in connection with the use of WACO facilities, including but not limited to claims alleging negligence. This is a binding contract that is intended to provide a comprehensive release of liability, but it is not intended to assert any defenses that are prohibited by law. If any part of the contract is deemed unenforceable, all other parts shall be given the full force and effect.

Vendor Signature _____ Date: _____