

**APPLICATION  
FOR CRAFTS/FOOD VENDORS**

FRIDAY       SATURDAY

CHECK ONE:    CRAFTS       FOOD       OTHER

**NAME:** \_\_\_\_\_

**BUS./ORG.:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**PHONE:(DAY)** \_\_\_\_\_

**EMAIL:**

**FAX:**

**BOOTH SPACE IS 12' X 12' (SIDE BY SIDE)  
PLEASE INDICATE NUMBER OF SPACES**

	\$50.00 X _____	= \$ _____
<b>ELECTRICITY</b>	\$10.00 X _____	= \$ _____
<b>TOTAL AMOUNT ENCLOSED</b>	_____	\$ _____

**BRIEF DESCRIPTION OF WORK OR FOODS:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby release and hold harmless The Bowdon Area Historical Society, The City of Bowdon, and all parties associated with the Bowdon Founders Day. I understand and Agree to all rules and regulation set forth in this application.

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**BAHS  
Attention: Dorothy Fielder  
Founders Day Arts and Crafts / Vendors  
PO Box 112  
Bowdon, Georgia 30108**