

First Saturday Vendor Application

October, November, December & January

DUNNELLON CHAMBER & BUSINESS ASSOCIATION

20500 East Pennsylvania Avenue

Dunnellon, FL 34431

Judy Terwilliger, Executive Director

(352)489-2320 dunnellonchambercommerce@gmail.com

Name & Business Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Cell _____

Email _____

_____ One month: \$20 _____ Three Months: \$50 _____ (Season) Four Months: \$65

Items to be sold (at park): _____

_____ Please list my Yard/Garage Sale at my address \$5 _____

GENERAL INFORMATION AND REGULATIONS FOR VENDORS AT THE PARK

BOOTH SIZE: Booth space is approximately 12x12.

BOOTH DISPLAY: All items be displayed on tables, stands, or other display items. Tables and tents are required and **NOT** provided by the event coordinators. **No items are to be displayed on blankets.**

ELECTRICITY: Electricity will **NOT** be provided with a regular space rental. If electricity is needed, please bring a **QUIET** generator.

SALES TAX: Vendors are responsible for collecting Florida State Sales Tax and remitting it to said State Dept. of Revenue.

FOOD SALES: Food vendors must abide by the State of Florida's regulations for the sales of food items. If a state inspector is on-site, the vendor must comply, immediately correct the situation, or leave the event, and **NO REFUND WILL BE GIVEN.**

SET UP: May begin at 8 am. **All exhibitors are required to stay and maintain their display areas throughout the entirety of the event. No breakdown should begin until after 2 pm for vendors. The event is from 10 am-2 pm.**

CLEAN UP: **Vendors are responsible** for cleaning their area and must not leave any trash or boxes behind.

WEATHER: Be prepared for rain, wind, sun, heat, or cold. There is no weather make-up date scheduled for these events. **No refunds given for weather or if vendors decide not to attend for any reason.**

By the execution hereof, I/We agree to hold the city of Dunnellon and the Dunnellon Chamber & Business Association and its directors harmless from all damages, suits, claims, etc. Arising from My/Our negligence or intentional wrong of any of My/Our employees, invitees, or guests. Please read the above general information and regulations and sign below to acknowledge and return.

Sign: _____

Date _____

Chamber use only:

Check # _____ Amount _____ Date received: _____