

City of Climax Use Only:

() Check () Money Order () Cash

Check # _____ Amount Paid _____ Participant # _____ Date Received _____



**City of Climax's Swine Time 2022
Food Vendor/Amusement Booth Application
Saturday, November 26, 2022**

www.cityofclimaxga.com
(229)400-3081



Name: _____ Phone #: _____

Address: _____ City: _____

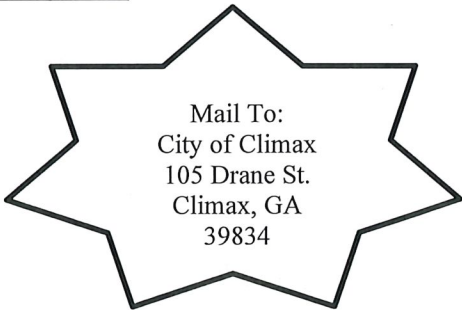
State: _____ Zip: _____ Email: _____

Please attach a brief description of your exhibit and a complete list of items you want to sell (only the approved items can be sold at your booth. No more than two vendors can sell the same item):

Vendors who market rides must have their insurance agent mail or fax us a Certificate of Insurance showing current liability insurance coverage before space can be confirmed.

**Entry Fee: Early Bird - \$100 through Friday, November 5, 2022
\$125 – Postmarked after November 5, 2022**

Payable To: City of Climax – Parks & Recreation
In the form of cash, check, or money order



Rules: All applications are subject to approval by the City of Climax. Those not chosen as vendors will have their entry fee returned.

Approved applicants will receive a confirmation letter by email on Thursday, November 10, 2022. If you wish to receive your confirmation by mail, please send a self-addressed envelope with your application.

Check-in at Parker Park Pavilion – Swine Time Welcome Booth – between 6AM – 8AM

Each participant is responsible for their setup including but not limited to tents, tables, and merchandise. Spaces are 12'x12' with parking available for one vehicle behind each space. Parking for setup is permitted prior to 8AM. All other vehicles must be moved at that time.

*****No Refunds*****No Beverage Sales*****No Electric or Water Access *****

By signing below, I agree to NOT hold the City of Climax, or any of its members responsible for ANY DAMAGE, LOSS, SICKNESS, OR INJURY. I am at least 18 years of age and I understand that I will be responsible for my exhibit at all times. I will be mindful of COVID and be prepared to take all necessary precautions to protect myself as well as others.

Signature: _____ Date: _____