

FallFest 2021

Food Vendor Application

Saturday, October 16, 2021 from 9 am- 5 pm

Located in Historic Downtown Clifton

Business Name (Please print): _____

Contact Name: _____

Address: _____

City, St, Zip: _____

Phone #: _____ Tax ID #: _____

Email Address: _____ T-Shirt Sizes (2 count) _____

Make checks and money orders
payable to:

Clifton Main Street
P.O. Box 231
Clifton, TX 76634

PHONE #: 254-675-8337
FAX #: 254-675-8358

Describe or list in detail your menu or submit detailed attachment.

**** _____ Please initial as your agreement and understanding of Vendor Rules & Regulations.**

<i>Day Only 10'x10'</i>	<i>Day/Evening 10'x10'</i>	<i>Day Only 10'x20'</i>	<i>Day/Evening 10'x20'</i>	<i>Bosque County Resident Discount</i>	<i>Early Bird Discount Deadline 7/31/21, 4pm</i>
\$350	\$525	\$500	\$750	(\$10)	(\$10)
					Total:

ACKNOWLEDGEMENT & RELEASE

It is understood that the Clifton Main Street Program merely arranges for the exhibition and sale of items and assumes no responsibility for the guarding, or safekeeping of the same. The exhibitor further agrees to hold blameless the City of Clifton from any claim, action, or demand by any person for expense or damage arising from the exhibition.

I agree to keep safe and hold the City of Clifton, and the Clifton Main Street Program harmless from any and all action, liabilities, damages, judgments, cost and expenses including reasonable attorney fees, in the event an action is filed or does in any way accrue against the City of Clifton or the Clifton Main Street Program of consequences of this Agreement or for any act, negligence, or omission of the Sponsor or the Sponsor's agents, employees, participants, or volunteers in relation to the event. In addition, I will be responsible for reimbursement to the City of Clifton and the Clifton Main Street Program whenever such claims and actions reach voluntary settlements rather than judgments. Subsequent full contributions shall be paid to the City of Clifton and the Clifton Main Street Program.

Signed: _____ Date: _____

Office use only: _____ Paid (check # _____) _____ Booth Number