



# 9<sup>th</sup> Annual Sugar Hill Fall Festival

E.E. Robinson Park  
Saturday, October 17, 2009  
11:00am – 5:00pm

## Car Show Vendor Application

Name of Business/Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #'s (Day): \_\_\_\_\_ (Evening): \_\_\_\_\_ (Cell): \_\_\_\_\_

Email Address: \_\_\_\_\_ Web Address: \_\_\_\_\_

Please list **all artwork and/or crafts** items to be sold at your booth: \_\_\_\_\_

\_\_\_\_\_

**All applicants MUST attach a photo of their product(s) and booth set-up. Without photos, application will be considered incomplete and returned to sender. All photos become the property of the City of Sugar Hill.**

I hereby apply for a booth space for sale purposes in the Sugar Hill Fall Festival. Having done so, I hereby agree to abide by all rules and regulations previously set forth in this application. I further understand that failure to abide by said rules will result in my being removed from said Festival and I will not be invited nor included in future Festivals sponsored by Sugar Hill.

The City of Sugar Hill, a Georgia Municipal Corporation, and its agents, employees, and representatives thereof, assume no liability or responsibility for injury or loss that may result to any exhibitor or his/her personal affects, including goods for sale occurring on the premises or arising under Sugar Hill Fall Festival activities and said exhibitors agree, contest, and acknowledge to hold the City of Sugar Hill harmless for any injury or loss.

I have read and fully understand all the rules and guidelines of the Sugar Hill Fall Festival. I further understand that the approval of this application will be subject to the decision by a review board.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please check the appropriate space/services requested. If you need additional space or electricity, you are required to purchase it at the time of application:

12' x 12' Arts/Crafts Space: \$50.00/each\*      \$ \_\_\_\_\_ X number of spaces \_\_\_\_\_ = \$ \_\_\_\_\_

Please enclose your application, photos, and check (or credit card info) for full amount (payable to The City of Sugar Hill) before the deadline of September 25, 2009, to: City of Sugar Hill, 4988 West Broad Street, Sugar Hill, GA 30518-7915.

Questions? Contact Mr. Sam Taylor or Ms. Darcee Shafer at 770-831-7413, email: [staylor@cityofsugarhill.com](mailto:staylor@cityofsugarhill.com) or [dshafer@cityofsugarhill.com](mailto:dshafer@cityofsugarhill.com), fax 770-831-7546, [www.cityofsugarhill.com/fallfest](http://www.cityofsugarhill.com/fallfest)

MasterCard: \_\_\_\_\_ Visa: \_\_\_\_\_ Credit Card No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Cardholder Name (Printed): \_\_\_\_\_ Signature: \_\_\_\_\_

**For Festival Use Only Please**  
Date Received: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Check No: \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ Booth Assignment: \_\_\_\_\_