

BETHEL ISLAND CHAMBER OF COMMERCE
24th ANNUAL 50'S BASH & CAR SHOW
AUGUST 13 and 14, 2011
VENDOR APPLICATION (Please Print)

Company/Organization Name: _____

What Is Sold At Booth: _____

Applicant Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: Daytime _____ Evening _____ Fax _____

Email contact number: _____

1. Have you operated or assisted in the operation of a booth at the Bethel Island 50's Bash? Yes ___ No ___

2. Do you have a valid current California Seller's Permit? Yes ___ No ___

3. What are the actual dimensions of your booth/trailer? Including space used at side or back. Include awning/trailer tongue, etc. if applicable.

Space size is 10X10. Call for pricing if extra space is needed. Dimensions: Front _____ ft. by Depth _____ ft.

4. There is no electricity.

5. Do you bring and use a generator for your booth? Yes ___ No ___

6. What type of waste product will your booth generate? Example: grease, charcoal, gray water, cardboard, etc. Please describe. This section must be completed or application may be returned to you.

7. Contra Costa Health Department: Please initial your understanding _____.

Contact our chamber office for your food vendor Health Department forms. Must be completed by Friday July 22nd.

I have read and fully understand the Bethel Island 50's Bash Policies, Procedures and Requirements for application to participate in the 2010 Bethel Island 50's Bash and Car Show on August 13 & 14, 2011 and have provided complete and accurate information on this application on all items #1 through #6. I understand all applications are subject to approval by the Bethel Island 50's Bash Vendor Committee. Failure to provide complete and accurate information on this application (concerning booth size, product type, etc.) May result in the Bethel Island 50's Bash Vendor Committee prohibiting operation without refunding fees or deposits paid.

Signature Of Applicant: _____ Date: _____

Booth Price: \$50 single day or \$75 for both days. **NO REFUNDS RAIN OR SHINE!**

Make check payable to: Bethel Island Chamber of Commerce Phone: (925) 684-3220

Mail completed application and fees to: P.O. Box 263 Fax: (925) 684-9025
Bethel Island, CA 94511

Email: bicc@bethelisland-chamber.com

Web: www.bethelisland-chamber.com

Note:

Food Vendor forms must be completed and in our hands by July 22nd.

Hours of Operation:

Saturday 7/18 9:00 AM - 8:00 PM

Sunday 7/19 9:00 AM - 6:00 PM

Assigned booth: # _____ by:	Date: _____
Location: _____	