

COMMUNITY DAY REGISTRATION FORM

| Event Space Details | |
|---|--|
| Please select your vendor type | |
| What is your category of product | |
| Description of your items/service | |
| Select the space size you will require? | |
| Please add any comments | |
| | |

| Contact Information | | | |
|---------------------|---------------|--------------------|----------|
| First Name | Last Name | Business Name | |
| | | | |
| Phone Number | Email Address | Contact Preference | |
| | | | |
| Street Address | City | State | Zip Code |
| | | | |

The community day event is for a one day period. Setup will begin at 7:00 AM. Vendors may not pack up before the end of the event at 7:00 PM.

No smoking, alcoholic beverages, or illegal substances are allowed on the grounds.

In the event of unforeseen circumstances such as natural disasters, both parties will work together to find a suitable resolution.

I agree to indemnify and hold harmless the Community against any claims, liabilities, or damages arising from the event.

I grant permission to the Community event organizers to use any photographs, videos, or recordings of my business during the event for promotional purposes without compensation.

I voluntarily agree to these terms and sign it of my own free will.

Signature:

Signature Date: