

Another Bloomin' Festival 2024 Non-Food Vendor Form



Another Bloomin' Festival • March 30, 2024
Commercial and Arts and Crafts



• **ENTRY DEADLINE: MARCH 1, 2024** •
\$50 LATE FEE IF SPACE IS AVAILABLE

CONTACT: _____

BOOTH NAME: (USED IN ADVERTISING) _____

FIRST TIME EXHIBITOR: ___ YES ___ NO WEBSITE _____

ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

TELEPHONE: _____ EMAIL: _____

CELL PHONE OR CONTACT NUMBER FOR **DAY OF FESTIVAL** _____

ITEMS TO BE SOLD: _____

PLEASE ATTACH A SEPARATE LIST OF ITEMS INCLUDING PICTURES OF ARTS & CRAFTS IF FIRST YEAR.

SPACE REQUESTS:

RENTAL: PLEASE CHECK

COMMERCIAL (\$50 for CHAMBER MEMBERS / \$60 for NON-MEMBER)
[15'x15' - CENTRAL OR EAST PARK ON ASPHALT]

ARTS & CRAFTS (\$50 for CHAMBER MEMBERS / \$60 for NON-MEMBER)
[12'X12' WEST PARK -GRASS BASE NEAR FOUNTAIN; SOME OVERHEAD SHADE]

ELECTRICITY (110 V ONLY) YES NO **NO GENERATORS ALLOWED**
Electricity is limited. The Festival Committee will attempt to honor special requests, but event officials cannot give preferential treatment.

SPACE SPECIAL REQUESTS _____

IF MORE THAN ALLOTTED BOOTH SPACE IS NEEDED, 2 BOOTHS MUST BE PURCHASED.

ALLOTTED SPACE REQUIREMENTS WILL BE STRICTLY ENFORCED.

COMMERCIAL BOOTHS ARE DESIGNED FOR COMMERCIAL DISPLAYS, RETAIL SALES (ETC) ITEMS ONLY. WE ARE A FAMILY FESTIVAL. **NO VENDOR SHALL OFFER ANY PRODUCTS FOR SALE AND/OR DISPLAY THAT REFERENCE SEX, DRUGS, VIOLENCE, OR ANYTHING THAT THE FESTIVAL COMMITTEE DEEMS AS INAPPROPRIATE.**

PLEASE RESERVE _____ (#) BOOTHS. TOTAL ENCLOSED \$ _____

PAYMENT MUST ACCOMPANY THIS FORM. FORM & PAYMENT DUE BY MARCH 1, 2024.
(NO REFUNDS WILL BE GIVEN UNLESS APPROVED BY THE FESTIVAL COMMITTEE)

COMPLETE AND RETURN TO:

METTER-CANDLER CHAMBER OF COMMERCE | PO BOX 497 • METTER, GEORGIA 30439
PHONE 912.685.2159 • anotherbloominfestival@gmail.com



**MAKE CHECKS PAYABLE TO METTER-CANDLER CHAMBER OF COMMERCE.
PAY VIA CREDIT CARD BY CONTACTING THE CHAMBER OFFICE.**

FOR COMMITTEE USE ONLY

APPROVAL YES NO

DATE RECEIVED _____
REQUESTED _____ BOOTHS
ELECTRICITY _____ YES _____ NO

BOOTH(S) # _____
DATE PAID _____ TYPE _____
SENT BOOTH INFO DATE _____