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TOWN ADMINISTRATOR
Calvin A. Bonenberger Jr.

RISINGSUNMD.ORG

VENDOR APPLICATION

Contact Information

Business Name:		Contact Name:		
Address:	City:	State:	ZIP:	
Work Phone:		Cell Phone:		
Email Address:				

Detailed Description of Business/Craft

Booth Space (10' x 10' spaces)

<i>Vendor Type (please select one):</i>		
<input type="radio"/> Retail	<input type="radio"/> Promotional	<input type="radio"/> Food
<input type="radio"/> For Profit <input type="radio"/> Non-Profit*	<input type="radio"/> For Profit <input type="radio"/> Non-Profit*	<input type="radio"/> For Profit <input type="radio"/> Non-Profit*
*Must submit proof of non-profit status.	*Must submit proof of non-profit status.	<input type="radio"/> Electric Required
		Food(s) Sold: _____
Total amount enclosed with application: Number of requested spaces: _____ at \$50/space = _____		

Emergency Contact

Name:		Cell Phone:		
Address:	City:	State:	ZIP:	

LIABILITY WAIVER

I, the registrant or parent/guardian of the registrant agrees that I will abide by the rules as set forth in the invitation to participate letter. Recognizing the possibility of physical injury associated with the activity and in consideration of the Town of Rising Sun and the employees, officers, directors, agents, successors, and assigns of said parties from any claims resulting from the registrant's participation in the event, I acknowledge that Rising Sun does not carry accident and health insurance, and assure Rising Sun the registrant is fully covered by medical insurance.

IMPORTANT NOTES

You are responsible for collecting and submitting the 6% Maryland Sales Tax. Valid trader license should be present where applicable. Vendors will be taken on a 1st come 1st serve basis. Please send your application in early so you will have a spot. No duplicate vendors, first application will be the one to receive a spot. Please report to the Welcome Table upon arrival to receive your information packet.

DO'S & DON'TS

1. Please, no cans of silly string or other items that can create a nuisance, be abused, or create unnecessary trash.
2. Remember that this is a family event; the Town of Rising Sun reserves the right to request that any items not deemed to be suitable for viewing by all ages be removed from your display(s).
3. We ask that each vendor be responsible for cleaning up their respective areas at the end of the day. Set up will begin at 8 AM and break down will not start until 4:30 PM.
4. No vehicles will be allowed back in the area until after 5:00 PM.

APPLICATION & PAYMENT DUE BY SEPTEMBER 20, 2022

MAILING ADDRESS	DELIVERY ADDRESS
Town of Rising Sun ATTN: Event Coordinator P.O. Box 456 Rising Sun, MD 21911	Town of Rising Sun ATTN: Event Coordinator 1 E. Main Street Rising Sun, MD 21911

AGREEMENT & SIGNATURE

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a participant, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Signature

Printed Name

Date