



The Marshall Chamber of Commerce
Santa Fe Trail Days
September 11, 2010
CRAFT SHOW APPLICATION
ENTRY DEADLINE: Sept. 3, 2010

<u>Office Use Only</u>	
Date Pd	_____
Amt. Pd	_____
Electric	_____
Canopy	_____
D/C/F	_____

Name: _____ Business Name: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Email Address: _____ # of spaces (each 10' x 12'): _____

I will sell and display the following _____

BOOTH FEES: Please indicate below what category you are requesting and amount enclosed.

Crafters: \$50.00/no electricity _____ **\$60.00/w electricity (prior approval required)** _____

Food Vendors: \$65.00 ____ **Demonstrator Selling: 10%** ____ **Demonstrator Only: No Fee** ____

Non Profit Organizations: \$25 _____

****Electricity needed (ex. 110/20 amp, 220/50 amp)** _____ **# Outlets Needed** _____

Enclosed is my payment of \$_____ for _____ booth spaces

I will be bringing a tent/canopy: Yes____ No_____ Dressing in time period: Yes ____ No _____

Please indicate on your application if you will be using a tent; some of the booth spaces will not allow set up of tents due to low hanging tree limbs. A second letter will be sent out with set up and parking of vendor vehicles information. Missouri Sales Tax forms and a chart will be handed out for your convenience in charging sales tax.

I UNDERSTAND AND AGREE THAT THE CITY OF MARSHALL, AND THE CHAMBER OF COMMERCE, THEIR EMPLOYEES, DIRECTORS AND COMMITTEES, ARE NOT LIABLE FOR ANY PERSONAL INJURY, OR DAMAGE OR LOSS OF EXHIBITORS WARES AND EQUIPMENT OR PERSONAL PROPERTY, AND FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS, THE COUNTY OF SALINE, THE CITY OF MARSHALL, AND THE CHAMBER OF COMMERCE, THEIR EMPLOYEES, DIRECTORS AND COMMITTEES FROM ALL CLAIMS.

 Applicant Signature/date

Return completed application along with your payment to:
(Make checks payable to the Marshall Chamber of Commerce)

Jill Murray
 Marshall Chamber of Commerce
 214 N. Lafayette Ave.
 Marshall, MO 65340
 (660) 886-3324