

## Dawsonville Jingle Market CRAFT VENDOR APPLICATION

WHERE: City of Dawsonville

415 GA 53

Dawsonville, GA 30534

**WHEN:** Saturday, November 18, 2023, 2:00 pm – 8:00 pm

**SET-UP:** Day of Event: Set-up starts at 11:00 am

Vehicles MUST be moved to side of building by 1:30 pm &

MUST be set up by 2pm

**DEADLINE:** All applications must be submitted by October 18, 2023.

Please mail or email the following application.

**VENDOR SPACE:** Booth space is 10'x10'. Vendors need to bring their own table, tent, items needed for their booth,

and/or battery-operated lights (Spotlights will not be turned on until after tree lighting

ceremony). Vendors will set up outside City Hall. Contact Jessica Grigsby, j.grigsby@dawson.org with

any questions.

**ELECTRICITY:** Vendors must list all electrical connection needed on application when submitted. Electrical

arrangements must be made prior to your arrival. Last-minute electrical changes **will not** be accepted. Electrical cords **will not** be provided; you must bring your own. **Vendor must secure** 

wires to prevent tripping hazards.

**SALES:** All items being sold or displayed MUST be contained in the booth space purchased. No items,

solicitation, or set-up shall take place outside the purchased booth space unless prior

arrangements have been made with the Jingle Market Event Coordinator.

**WEATHER:** The festival will not be cancelled because of inclement weather.

REQUIREMENTS: The exhibitor will be responsible for being open during the entirety of the Jingle Market (2pm-

8pm). You **CANNOT** vacate early. Your booth must be neat, attractive, and well-maintained. Signage with visible and clear pricing is required. You are responsible for setting up, maintaining, and removing your own booth,merchandise, and trash. **Vehicles will not be allowed to enter** 

the area to pack up until 8:05pm.

**CONTACT US:** Jessica Grigsby

Membership Director

**Dawson County Chamber of Commerce** 

Direct: 678-648-7322 Office: 706-265-6278

Email: <u>i.grigsby@dawson.org</u>

Fax: 706-265-6279

Mailing Address: 44 Commerce Drive

Dawsonville, GA 30534



## Dawsonville Jingle Market CRAFT VENDOR APPLICATION

Please complet	e and return this form along with your payment, Affirmation & Liability Release Form.
Business Name	<b>:</b>
Contact Name_	
Phone:	E-Mail
Street or PO Bo	x:
City:	State: Zip:
Nature of Good	s to be Sold:
Facebook Insta	following (please circle). We will tag you on our event media:  agram Other:  quests permission to display and sell the products and/or services <u>listed above.</u> Further, Dawsonville
•	erves the right to approve any product/item a vendor may wish to sell or dispense as well as limit the ssions selling the same product/item.
I have read, unde	rstand, and will abide with Dawsonville Jingle Market's general information, procedures, rates and
	plication, I acknowledge and agree to the terms of the Dawsonville Jingle Market. <b>No refund of Exhibits must remain open until closing.</b>
Applicant Signatu	re:
Please Print Nam	e:

The above named has read and understands the general information, procedures and conditions and seeks admission as a concessionaire.



Maximum 8' table (limited space)

\$50 Chamber Members, \$150 non-member

Authorized Signature:

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Electricity (15 amp/110 volt only) Extension cords & lights not provided 15 amps or 110 volts only	<b>\$10.00</b> (Per line)	= \$				
	Total Amount Enclosed	= \$				
<b>NOTE:</b> Electrical arrangements MUST be made prior to your arrival. Last-minute electrical changes will not be accepted. (NO GENERATORS PERMITTED)						
Payment may be made by check, credit card or cash.						
Please make all checks payable to Dawson County Chamber of Commerce.						
Mail to: Dawson County Chamber of Commerce, 44 Commerce Drive, Dawsonville, GA 30534						
PAY BY CREDIT CARD (you may call or come by the office with Credit Card information)  By supplying the following information, your credit card will be charged the full fee, as per your application, upon your acceptance as a Vendor at the 2023 Dawsonville Jingle Market.						
Business Name:	_					
Please Circle: Visa MasterCard American Express	s Discover					
Name on Credit Card:						
Card #:	Exp:	/				
Security Number:						
Billing Address of Credit Card:	_					
Phone Number:						

## DAWSONVILLE JINGLE MARKET AFFIRMATION & LIABILITY RELEASE

1.	hereby aff	firm that I have been well advised a	nd thoroughly informed
am exposing myself to c of this event. I also unde injury. I hereby personal	and policies of the event. I know that be certain known and unknown liabilities in erstand that if I choose to hire help for ally assume all risks associated with my me or any employee or temporary helps.	by participating in the <b>2023 Dawso</b> n my direct and indirect actions with the event, I am directly responsible voluntary participation in this event	nville Jingle Market, I the public and invitees for their actions or t for any harm, injury or
their members and/or di participation in the <b>2023</b> family, heirs, or assigns, risks in connection with therewith, whether fores	that Dawson County Chamber of Confirectors and officers may not be held list Dawsonville Jingle Market that may, and in consideration of being allowed said event for any harm, injury, or danseen or unforeseen; and further to save ate, heirs, or assigns arising out of my	iable in any way for any occurrence y result in injury, death, or other dar d to participate in this event, I hereb mage that may befall me, including e and hold harmless said event and	in connection with my mages to me or my by personally assume all all risks connected
written consent of my pa	of lawful age and legally competent to arents or guardians; that I understand ocument of my own free will.	_	•
Commerce and their me	instrument affirmed by my signature be embers, directors, and officers from all tion, property damage or wrongful dea	l liability whatsoever for personal inj	ury, employer's liability
I HAVE FULLY INFORM BEFORE I SIGN IT.	MED MYSELF OF THE CONTENTS O	F THIS AFFIRMATION AND RELE	ASE BY READING IT
Company Name: _			
Signature of Participant:		Date:	
Print Name:			