



VENDOR INFORMATION/APPLICATION
Dia de los Muertos-November 8, 2014

Name of Organization/Company: _____

Contact Name: _____

Address: _____

Email: _____

Phone: _____ Fax: _____

Business Vendor (\$100) Non Profit (\$50) Food Vendor (\$100) Sponsor (Please advise)

SPACE INFORMATION:

Standard size of space is a 10 X 10

Activity in booth: _____

Stage Mentions: _____

We will try our best to accommodate your electrical needs. If a generator is needed please let us know what you will need the generator for. Amps/Watts _____

Please bring any extension cords and power strips you may need.

Waiver of Liability The WCHHC will not assume any responsibility for loss or damage. The WCHHC strongly suggests that all exhibitors carry their own personal property insurance. I Agree to abide by all the rules set forth in this application for the: WCHHC-Dia de los Muertos' Event.

- I agree to the terms and conditions as stated
- I do not agree to the terms and conditions as stated

Exhibitor's authorized signature: _____ Date: _____

For more information please call Julie Chapa @ 512-218-7014

Return Forms & Payment to:
Julie Chapa at jchapa@roundrocktexas.gov
Or mail the form & payment back to:
Julie Chapa 216 E Main Ave, Round Rock, TX 78664
**Please make all checks out to the Round Rock Ballet Folklorico*