

Montana BBQ COOK-OFF June 24, 2018

APPLICATION FOR VENDOR BOOTH (non-food)

Please complete the form below and send it with your payment to reserve your space. You will need to supply your own tables and chairs.

If you have any questions please call: GINGER 406 425-4969 gingerbelle98@yahoo.com

Your payment should be sent by June 8, 2018

To: AAMA; PO Box 62; Absarokee, MT 59001.

Fee: \$40.00 for a 10X10 space_____ (or) \$60.00 for a 10X20 space_____

Event time Sunday, June 24, 2018 Time: 11:30am to 5:00pm

YOU MUST BE SET UP BY 10:30 and your vehicle MUST be off the street by 9:00am.

NO SET UP prior to 7:30 AM unless you have prior permission. Your space will be designated.

Please leave your space clean and remove all of your trash.

Name_____

(P.O. Box/Street)_____

(City)_____ (State)_____ (Zip)_____

Phone_____ Cell_____

Vendor should be prepared to put up his/her own sunshade and rain protection. We suggest you be prepared for any kind of weather. Exhibitors are responsible for setting up and attending their booth at all times and cleaning their space at the end of the day.

NO ELECTRICITY WILL BE PROVIDED.

Products to be sold (subject to approval)

Vendor agrees that AAMA/Montana BBQ Cook-Off, and their officers, directors, representatives, employees, and agents shall have no responsibility whatsoever for any loss or damage to Vendor's equipment, supplies, goods or other property. Neither the AAMA/Montana BBQ Cook-Off shall be liable for any loss or damage to the property of Vendor or any of its representatives, employees, agents, patrons and guests, because of fire, robbery, accidents, or any other cause whatsoever that may arise from Vendor's use or occupancy of its allocated space during the Cook-Off. Vendor agrees to indemnify and hold harmless representatives, employees, and agents of AAMA/Montana BBQ Cook-Off against any and all claims of any person whomsoever arising out of Vendor's participation in the Cook-Off or from acts or omissions of Vendor, its representatives, employees, agents, patrons, or guests.

ALL PARTICIPANTS MUST SIGN RELEASE FORM

Signature:_____ Date_____