

**Send your application &
table fee in by February 1st
& take 10% off!**



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BURKE CATHOLIC CHOCOLATE FESTIVAL APPLICATION FOR PARTICIPATION – MARCH 27, 2010

Name of Business/Organization: _____

Address: _____

Contact Name: _____

Phone Number: Business () _____ **5:00 a.m.** number to call in case of weather emergency () _____

Best time to call Business number: _____

Email address: _____

Will you require electricity: Yes _____ No _____

Will you require refrigeration? Yes _____ No _____

Number of Spaces required: (please circle) 1 @ \$100 2 @ \$150 3 @ \$200

If more spaces become available would you be interested in obtaining another space? _____ If so, how many? _____

Number of Employees working the festival? _____

What are the products to be sold? _____ Are you giving away free food? _____

Will you be bringing samples? _____

Can you donate an item for raffle? If yes, what is the item: _____

Business License # _____

Liability Insurance carrier/policy number: _____

We have read and understand the rules and regulations of this event and agree to indemnify and hold harmless John S. Burke Catholic High School., its Administrators, faculty, students, and volunteers from and against any and all costs (including reasonable attorney fees), losses, damages, liability claims, or causes of action in any way resulting from acts or omissions of John S. Burke Catholic High School, in connection with or in any way related to the event for which this application is being made. All vendor participants will be responsible for obtaining any required licenses and permits and insurance coverage as required.

We are enclosing a check, payable to The Burke Eagles Educational Foundation, for \$100 for each space requested and understand that this payment will be **non-refundable after March 1, 2010.**

Signed:

Printed Name:

Dated:

Title:

Please mail completed application and monies (payable to the Burke Eagles Educational Foundation) to:
John S. Burke Catholic High School
Louise Valenti
Director of Development & Alumni Relations
80 Fletcher Street * Goshen, NY 10924
(845) 294-5481 x278

Table Reservation Policy:

We will make every effort possible to accommodate your needs. Table assignment is on a first come, first serve basis. Vendors may request additional space based on availability at the closing date of March 1, 2010. Requests will be processed as soon as received.