Booth:	
Street:	
Paid:	



Saturday, October 18th, 2025

Vendor Application

Vendor Name: _					
Email:					
Contact Name:_				_	
Address:				_	
Phone #:				_	
ARTS Booth:(1) 110 Outlet	\$55 (10x10 space) \$65 (10x10 space)	Food Booth:(1)Electrical Outlet:	\$80 (10×10	space) _ \$100	
State of MS DOR requires Sales Tax to be collected and turned in at the end of the event.					

Please list your items and give a	hrief description:			
Please list your items and give a brief description:				
Number of spaces required:	Number of 110 Outlets:			
Booth Spa	ces are 10x10. Outlets are 110 ONLY.			
Disclaimer/General Release:				
from all manner of actions, suits, damages, damage to the undersigned's property whil	rge the City of Booneville and the Booneville Main Street Association claims, and demands whatsoever in law or equity, from loss or e in possession, supervision, or auspices of the Fall Festival Festival, g I agree to set up during the event at my own risk.			
Signature:	Date:			
Deadline for Applications will be Aug @ 662-416-9278 or Mainstreetos@b	gust 25 th . For more information contact BMSA office staff pooneville-ms.gov.			
Mail Payment: Booneville Main Stre 38829	eet Association, 100 West Church Street, Booneville, MS			
PLEASE NOTE: NO refunds will be is:	sued. We ONLY provide the space for the event. NO			
	e barricades. NO spray paint, stain, or oil-based substance			
can be used on the asphalt and sidev	valk areas. DO NOT USE THE DRAINS FOR OIL DISPOSAL.			
For office use ONLY:				
Amount:	Form of Payment:			
Date Paid:	Check #:			

Booth #: _____ Paid: _____