



CATHEDRAL SCHOOL OF SAINT MARY

ANNUAL FALL FESTIVAL 2016

VENDOR APPLICATION FORM



Name (of Organization/business): _____

Date of Event: Sunday, October 30, 2016

Time: 9:00 a.m. – 5:00 p.m.

Location: Cathedral School of Saint Mary school grounds - 910 San Jacinto Blvd. Austin, TX. 78701

Deadline to Submit Application with Fee: No Later than Friday, October 14, 2016

Reservation Fee: \$60.00 New Vendors \$50.00 Returning Vendors from 2015.

Make Check (s) payable to: *Cathedral School of Saint Mary PTC*

Mail or bring Vendor Application Form and check to: Cathedral School of Saint Mary – 910 San Jacinto Blvd. Austin, TX. 78701

Donation Item to Auction: _____

Description of Donated Item: _____

Setup: 7:00 a.m. – 8:00 a.m.

Equipment: Electrical Outlet (circle one): YES NO

If yes, how many? _____

Vendors must bring their own table (not to exceed 10 x 10 dimensions), chair and canopy (optional in the event of inclement weather).

Vendors are responsible for set up of their own reserve area and sales and receipt of cash, checks or credit cards only on their booth.

No refunds for last minute cancellations. Vendors must notify the Vendor Chair at (512) 577-0019, 48 hours in advance of cancellation.

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

PHONE: _____

EMAIL ADDRESS: _____

DESCRIPTION OF THE WARES TO BE DISPLAYED AND SOLD:

PLEASE SIGN THE FOLLOWING RELEASE FROM LIABILITY CLAUSE:

THE UNDERSIGNED, in consideration of the use of the assigned space, and the adjoining premises, together with the promotion of CATHEDRAL SCHOOL OF SAINT MARY annual Fall Festival, hereby releases and agrees to indemnify and hold harmless Saint Mary's Catholic Church, The Catholic Diocese of Austin, its staff and its supporters from any and all liability of claim for any injury, loss, or damage, including unknown claims, to person or property suffered by the undersigned, his agents, or assigned while exhibiting at his/her designated space and through the course of his/her participation in the annual Fall Festival.

SIGNATURE: _____

FOR OFFICE USE ONLY:

DATE RECEIVED:

TIME:

BY: