



2018 Food Booth Application Form
June 22nd: 5pm-9pm and June 23rd: 9am-4pm, Downtown Maryville

Space is limited and is available on a first-come basis. The County Health Inspector will require all food vendors to have a valid health permit & abide by current health codes for preparing and serving food. Vendors are required to have a minimum \$1,000,000 (One Million Dollars) general liability policy and name the Blount Partnership as Additional Insured on the policy.

Company: _____ Contact: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Please describe the type of products you would like to sell at your booth.

Rules, Health Department Requirements, and foods that cannot be served at the Festival

_____ I agree to the attached rules

You must collect and report Tennessee sales tax and pay the health inspection fee.

Booth Space Cost:

_____ Booth, electricity - \$150 (limited)

_____ Booth, no electricity- \$125

* No REFUNDS for inclement weather

Electrical amps required _____ Only 110 available. Bring your own extension cords, water hoses, etc.

Tent Size _____ Number of Tents _____

If space required exceeds 20'x20' you will be charged for 2 booths. If you want to provide seating and it exceeds 20'x20' you will be charged for a non-electrical booth.

Each booth is required to have a 2A 10 BC fire extinguisher and comply with Fire Marshal Codes and Regulations

Deadline: Friday, April 27th.

Hold Harmless Agreement and Agreement to Terms and Conditions

The undersigned hereby releases and agrees to indemnify and hold harmless the Blount Partnership, its employees, agents and assigns, the GSM Hot Air Balloon Festival Committee, and the volunteers for the same regarding any and all liability for damages or injuries to persons or property which the undersigned, his or her agents or employees may sustain while participating in the GSM Hot Air Balloon Festival except where such damages or injuries result from the gross negligence of the Blount Partnership. Such indemnification shall include reasonable attorney's fees and costs.

I have read and agree to all the regulations stated above and in consideration of participating in the GSM Hot Air Balloon Festival agree to be contractually bound to the same.

Signature: _____ Date: _____

PLEASE RETURN COMPLETED CONTRACT TO: Kim Mitchell

Blount Partnership, 201 South Washington St., Maryville, TN 37804 Phone: 865-983-2241 FAX: 865-984-1386

Make checks payable to: SMTDA

Email: kmitchell@blountpartnership.com