

S T. MARY'S FEAST
JULY 19, THRU JULY 23, 2017
CONTRACT / AGREEMENT

BUSINESS NAME: _____ CONTACT PERSON: _____

ADDRESS : _____ CITY : _____ ST: _____ ZIP: _____

PHONE: _____ FAX: _____ E-MAIL: _____

List of items you will be selling: _____

If you sell food we need your Health Dept. License number: _____

UPON SIGNING OF THIS AGREEMENT THERE WILL BE NO CHANGES OR AD ONS TO YOUR FOOD MENU.

<u>BOOTH SIZE :</u>	<u>ENTRY FEE FOOD :</u>	<u>ENTRY FEE NON/FOOD :</u>	<u>LOCATION :</u>
10X10 _____	\$ 900.00	\$ 500.00	_____
10X20 _____	\$1,800.00	\$ 900.00	_____

FIRST 20 AMPS OF POWER IS FREE

EXTRA COST ELECTRIC 220-30 or 50 amps 200.00: \$ _____

Business License Fee: \$ 10.00

TOTAL BOOTH SPACE : \$ _____

Deposit: \$ _____

Balance: \$ _____

CHECKS PAYABLE TO : Royal Festivals, Inc.

MAIL TO : 100 Crest Dr.

Cranston, RI 02921

Contact Anthony Palmisano Cell 702-286-4944

Email: rfestivals@aol.com

Royal Festivals, Inc.

Signature: _____

Customer

Signature: _____

Print Name: _____ **DATE**
: _____