

EDEN MARKETING & SPECIAL EVENTS and the DRAPER MERCHANTS ASSOCIATION present
our 13th ANNUAL

SHAGGIN'

on Fieldcrest

SATURDAY
JULY 18

213 MAIN STREET
IN BEAUTIFUL EDEN, NC

7-10 PM

FEATURING JIM QUICK & COASTLINE

Food Vendor Application

Name of Business _____

Contact Person _____

Address _____

City _____ State _____ Zip _____

E-Mail Address _____

Phone Number _____ Fax Number _____ Cell Number _____

No. of spaces _____ (1) _____ (2)

List your electrical requirements _____

- **Electricity will be available.**
- **Vendor must supply their own extension cords.**
- **You must specify the type of outlet used.**

Length of trailer including tongue or tent size _____

Description of food items to sell (please be specific). **A menu with your pricing and photo of your set-up MUST be attached to this application.**

Make checks payable to Shaggin' on Fieldcrest. Please complete this application and mail your entry fee of \$100 per space to:

Cindy Adams
P.O. Box 70
Eden, NC 27289-0070

PLEASE NOTE THE FOLLOWING:

- Food vendors will be within a food court.
- All booth spaces must be left clean and litter free.
- **Please have grease controls in place. No grease or gray water is to be poured onto the ground or down any drains. Anyone found doing this will be asked to leave the event. You will be held responsible for any and all environmental clean-up costs.**
- All menu items along with pricing must be posted.
- The sale of alcoholic beverages is prohibited.
- There will be no refunds because of rain.
- **YOU ARE REQUIRED TO COMPLY WITH ROCKINGHAM COUNTY ENVIRONMENTAL HEALTH STANDARDS.**

WAIVER OF LIABILITY/PARTICIPATION AGREEMENT

In consideration of the City of Eden's permission and reservation of my space during Shaggin' on Fieldcrest, I for myself, my heirs, executors and administrators hereby release indemnify and hold harmless the sponsors, organizers or officials of Shaggin' on Fieldcrest/City of Eden, its agents, officers and employees and volunteers from any and all responsibility or liability for any and all damage, injury or illness of any kind or nature whatever to all persons and to all property proximately caused by, incident to, resulting from, arising out of, or occurring in connection with, directly or indirectly, my participation in Shaggin' on Fieldcrest. I further state that I am in proper condition to participate in this festival. I agree to abide by the Rockingham County Environmental Health standards.

Signature _____ Date _____

Shaggin' on Fieldcrest reserves the right to deny any and all applications.



If you have any questions concerning the event, email cadams@edennc.us or call 336-612-8049.

THANK YOU FOR BEING A PART OF Shaggin' on Fieldcrest!