

**Paint The Town Pink**

**Friday**

**Oct 20, 2017**

**6:30pm – 9pm**

**General Information**

Name/Company:		
Address:		
City:	State:	Zip:
Day Phone:	Evening Phone:	Fax:
Contact Person:		
Email:	Website:	

**General Exhibition Information**

Type of Exhibit: Food or Non-Food (Circle One)
Booth Equipment: Food Truck or Tent (Circle One)
Do you plan to hold a giveaway, registration or contest?

**Vendor Information**

Products: Please list items you plan to sell, to avoid being placed by a similar food vendor.	
Item:	Cost:

**Space Fees**

15' by 15' Space	<input type="checkbox"/> \$50.00
No Power or Water will be provided, Vendors must be 100% self contained Whisper Generators preferred – Not required <b>WE DO NOT FURNISH POWER CORDS OR CLEAR WATER HOSES</b>	
FEE TOTAL	\$

**Payment Notice**

**100% of the above fee must be received with the application.**  
**Space is allocated on a “first come, first serve” basis. No space will be allocated without full payment. Cash, money orders, or credit cards (except American Express) only. No personal checks.**

Signature of Applicant:	Date:
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**All applications are subject to approval by The Paint The Town Pink Committee.**  
 Make all Money Orders, Corporate or Cashier Checks payable to:  
 West Central Georgia Cancer Coalition  
 633 19th St, # B, Columbus, GA 31901  
 Attention: *Paint the Town Pink Committee*