



**THE 2015 DachsiePalooza VENDOR AGREEMENT**

**BUSINESS NAME:** \_\_\_\_\_

**BUSINESS TYPE:** \_\_\_\_\_

**ORGANIZATION:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**BUSINESS PHONE:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**DESCRIPTION OF BOOTH/TABLE ACTIVITIES** (If selling merchandise, please list a description of what will be sold):

\_\_\_\_\_  
\_\_\_\_\_

**➔ SALES TAX LICENSING FOR STATE OF COLORADO AND / OR CITY OF LOUISVILLE IS THE RESPONSIBILITY OF THE VENDOR.**

VENDOR DONATION in lieu of vendor fee. Please **make check or money order payable to The DachsiePalooza.**  
YOUR PAYMENT MUST ACCOMPANY A COMPLETED 2015 DACHSIEPALOOZA VENDOR AGREEMENT.

**➔ Payment and vendor form due before or on day of event. NO REFUNDS UNLESS EVENT IS CANCELLED.**

EVENT HOURS ARE 10:30 AM – 2:30 PM.

**VENDOR SET-UP 9:15 AM – 10:00 AM CLEAN UP 2:30 PM – 3:30 PM SHARP or an additional \$25 is charged to the event.**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

Vendor agrees to hold harmless The 2015 DachsiePalooza or its Agents for theft, damage or injury or for any other action related to The 2015 DachsiePalooza.

Mail this form and check or money order to: The DachsiePalooza POB 271016 Louisville, CO. 80027  
Email: [thedachsiepalooza@gmail.com](mailto:thedachsiepalooza@gmail.com)

