

Mount Harmon Yuletide Festival
December 4 & 5, 2021
Saturday & Sunday 11am – 3pm

VENDOR & EXHIBITOR REGISTRATION FORM

Name of Vendor/Exhibitor: _____

Contact Person: _____

Phone: _____

Mailing Address: _____

Email Address: _____

Website: _____

Vendor Set Up: Bring Own Pop Tent Set up OR Request Space in Covered Tent/Inside:

_____ Bringing own tent set up. _____ Tent/Inside space requested

We have limited tent and covered space available that will be assigned on a first come basis.

Tables – 8 ft long available for rent @ \$10 each. Please reserve me _____ tables. Please include check for table rentals with your registration. Table(s) will be set up in your assigned space.

Description of Items Sold or Exhibitor/Non Profit: (Please provide a complete list and basic description)

Vendor Fee: Please Note

Pricing: Mount Harmon Vendor Fee is 10% of Event Sales. Your Vendor Fee helps to cover the cost to promote and host the event. Event proceeds help to preserve, maintain, and operate Mount Harmon. Many thanks in advance for your support! No charge for non profit exhibitors.

Regulations

1. **Review:** The Mount Harmon Yuletide Festival Planning Committee reserves the right to approve all vendor applications and items for sale.
2. **Application:** All applications must include a list of items for sale and complete contact information. Applications are accepted on a first come basis.
3. **Food Vendors:** All food vendors are required to obtain and post a current Board of Health Certificate, and to provide proof of insurance.
4. **Check In and Set up:** Check in for site assignment is 9:00 to 10:30AM. All vendors must be set up by 10:30 with all vehicles moved to the parking area.
5. **Tear Down:** Vendors may tear down beginning at 3:00PM and space should be left in same condition as it was found it.
6. **No Rain Date**
7. **Maryland Sales Tax:** Maryland Sales Tax is the responsibility of the vendor.
8. **All Vendors must follow social distancing, leave no trace, and current MD CDC Guidelines.**
9. **Vendors/participants assume the risk of attending/participating in the event. Any who are sick or recently exposed to covid-19 or are in high risk category are asked to stay home.**

Mail to: Friends of Mount Harmon, Yuletide Festival: PO Box 65, Earleville, MD 21919
info@mountharmon.org 410-275-8819 www.mountharmon.org
Mount Harmon, a scenic and historic treasure.

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PARTICIPATION IN EVENT & INSURANCE WAIVER

I will attend as vendor on the following days:

_____ Saturday, December 4, 11am - 3pm & Sunday, December 5, 11am - 3pm
SET UP BY 10:30AM Saturday

_____ Saturday, December 4, 11am - 3pm
SET UP BY 10:30AM Saturday

_____ Sunday, December 5, 11am - 3pm
SET UP BY 10:30AM Sunday

Special Requests:

WAIVER OF INSURANCE & LIABILITY

I accept the terms and conditions of this registration and release Friends of Mount Harmon, Inc. from all claims of liability related to participation and attendance in event.

Date _____/_____/2021