



VENDOR & EXHIBITOR APPLICATION & REGISTRATION FORM

Name of Vendor/Exhibitor: _____

Contact Person: _____

Phone: _____

Mailing Address: _____

Email Address: _____

Website: _____

Limited to Artisan Made & Equestrian Themed Vendors. If no website, include photos type of items sold.

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

Vendor Cost: Bring Own Pop Tent _____ \$50 (10 X 10 Space, you supply tent/table)

Request Covered Space (very limited) _____ \$75 (10 X 5 Space, in vendor tent, table supplied)

Please email application to info@mountharmon.org and we will confirm your registration via email.

Once confirmed submit payment online at www.mountharmon.org (click Donate Now link, enter total).

Or mail check with copy of your vendor registration form to Mount Harmon, POB 65, Earleville, MD 21919

Date Accepted _____ Paid Online _____ Paid by check _____ Date paid _____

Vendor Fee/Proceeds: Your Vendor Fee helps to cover the cost to promote and host the event. Event proceeds benefit Mount Harmon and Wicomico Hunt Club. Many thanks in advance for your support!

Regulations

1. **Review:** The Mount Harmon Wicomico Hunt Point to Point 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 and are subject to approval. Please include photos or website with examples of items you plan to offer for sale.
3. **Check In and Set up:** Check in for site assignment is 8:00 to 9:30AM. All vendors must be set up by 10:00 with all vehicles moved to designated parking area.
4. **Tear Down:** Vendors may tear down beginning at 4:00PM and space should be left in same condition as it was found it before departing.
5. **No Rain Date (event is rain or shine)**

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



6. **No Refunds (unless event is cancelled)**
7. **Maryland Sales Tax:** Maryland Sales Tax is the responsibility of the vendor.
8. **All Vendors must follow Leave No Trace and MD CDC Guidelines.**
9. **Vendors/participants assume the risk of attending/participating in the event.**

Waiver of Insurance

I, (trade name) _____ understand that the Friends of Mount Harmon, Inc., the Mount Harmon Wicomico Hunt Point to Point, and Wicomico Hunt Club assume no responsibility for injury, damages and/or other liabilities which may occur during the Mount Harmon Wicomico Hunt Point to Point and while at Mount Harmon.

My signature on this Waiver of Insurance will serve as my acceptance of the terms.

_____ Date _____/_____/2023