

APPLICATION FOR ARTS & CRAFTS EXHIBITS  
FULTON OYSTERFEST

Wednesday February 28th- Sunday March 4th, 2018

THIS APPLICATION WILL NOT BE ACCEPTED UNLESS THE ENTIRE FORM IS COMPLETE AND A PICTURE ENCLOSED. IF  
SELECTED, YOU WILL RECEIVE AN ACCEPTANCE LETTER.

DATE \_\_\_\_\_

NAME \_\_\_\_\_ COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE NUMBER ( \_\_\_\_\_ )

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

Have you ever exhibited at the Fulton Oysterfest? Y\_\_N\_\_ If yes, how many years \_\_\_ Did you exhibit at the Fulton Oysterfest in 2017? Y/N

SIZE OF SPACE REQUIRED (Check one)

(All Spaces with power)

License Plate of Vehicle \_\_\_\_\_

( ) 10 x 10 space \$250.00

( ) 10 x 20 space \$500.00

\*If your booth has food in it, please fill out the attached food permit. If not, please disregard.

MERCHANDISE:

Please list all items which you will be displaying or selling during the show. Your space will be assigned on the basis of this list and the picture(s) enclosed. Once you are accepted, you may not display or sell any additional items without the approval of the Exhibits Committee. Violations of this rule can mean immediate cancellation of any agreement and forfeiture of all rental moneys. All payments will be due by the date on your acceptance letter. **NO PAYMENT IS DUE AT THIS TIME.**

The Fulton Volunteer Fire Department, the Oysterfest Committee, its officers, agents, employees, volunteers and other representatives shall not be held liable for and hereby are released from liability from any damages, loss, harm or injury to the person or property of the exhibitor or any of its officers, agents, employees, volunteers and other representatives, resulting from theft, fire, water, weather, accident or other reason. The exhibitor shall indemnify, defend or protect the Fulton Volunteer Fire Department, the Oysterfest Committee and hold harmless from any and all claims, demands, suits, liability, damages, loss expenses, attorney fees and expenses or any other nature which might result from or arise out of any action or failure to act on part of the exhibitor or any of its officers, agents, employees, volunteers or any other representatives.

By my signature below, I agree to the above statement. By my signature below I also agree I have read and that if selected, I and my agents or representatives will abide by the rules and regulations set forth in the Oysterfest Agreement Governing Exhibitors during the entire festival weekend.

Signature of Exhibitor \_\_\_\_\_ Date \_\_\_\_\_

APPLICATION NOT VALID WITHOUT SIGNATURE Please

use the back of the application for suggestions, comments or requests.

**Deadline for this application to be returned is: November 30, 2017.**

Please mail to: Fulton Oysterfest

PO Box 393

Fulton, TX 78358

361-463-9955, Fax to: 361-729-9121 E-mail: [fultonoysterfest@gmail.com](mailto:fultonoysterfest@gmail.com) (Attn: return Oysterfest application)