



2021 Vendor Registration Form

PAYMENT _____

SPACE NO. _____

REGISTRATION INFORMATION

[Please print]

Business Name: _____

Contact Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Mobile Phone _____

E-mail Address: _____

REGISTRATION FEE (NON-REFUNDABLE)

[Please put number of spaces]

#	Vendor	Fee	Total
	Vendor Fee (per space)	\$100.00	
	Electricity (one-time fee)	\$50.00	
TOTAL PAYMENT			\$ _____
Number of 12'x12' spaces			_____

METHOD OF PAYMENT

[Please select payment]

- Cash
- Cashier's Check/Money Order [payable to City of Hopkinsville]
Number: _____
- Credit Card: Visa MasterCard
Card #: _____
Expiration Date: _____ CVC: _____
Cardholder Name: _____
Card Holder Signature: _____

ADDITIONAL INFORMATION

➤ Electricity Required? YES NO _____ Amp _____ Volt
(Fill in blank)

Outlet Type:
(Check one)



(Available outlets)

➤ Products for sale (please be specific):

➤ Specific description of your set-up (e.g. 20' trailer, 10'x10' tent). Please give exact sizes of trailers, tents, etc.:

Please return completed, signed form and payment by July 30, 2021 to: Hopkinsville Parks and Recreation, 2600 Thomas Street, Hopkinsville, Kentucky 42240 or fax at 270-632-2065. Questions? Contact Parks and Recreation at 270-887-4290 or drundall@hopkinsvilleky.us.

DISCLAIMER

The City of Hopkinsville, Division of Parks and Recreation reserves the right to close registration prior to July 30, 2021, if required number of vendor spaces are filled prior to the above deadline.

WAIVER AND RELEASE

The undersigned agrees to defend and hold harmless the City of Hopkinsville, Division of Parks and Recreation, and all other festival sponsors and agents from all injury, loss, costs, claims, or damages to any person or property arising from, related to, or in any way connected with participation in the Summer Salute Festival. I grant permission for you to publish any and all photos taken during these activities. Event organizers are granted permission to have medical personnel treat me, if needed, during my participation in the event.

Printed Name: _____ Signature: _____ Date: _____

