



EXHIBITOR VENDOR APPLICATION



40th Annual North Carolina Oyster Festival
Ocean Isle Beach
October 17th – 18th, 2020

Company Name: _____

Representative Name: _____

Phone: _____ Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Tax ID# _____ Medium: _____

Festival Location: To be determined
Festival Hours: Saturday, October 17th, 2020 9:00 am – 6:00 pm
Sunday, October 18th, 2020 10:00 am – 5:00 pm

SPACE IS LIMITED. Please return your completed application *with* entry fee. Approval letters will be emailed. **The Oyster Festival committee reserves the right to deny any application for any reason.**
RAIN OR SHINE EVENT – NO REFUNDS ONCE ACCEPTED.
The governing body of the NC Oyster Festival Committee reserves the right to CLOSE the festival due to extreme weather or public safety concerns, without refund to vendor.

APPLICATION MUST BE COMPLETED IN FULL (all 4 pages) TO BE CONSIDERED

This application is for a 10' x 10' booth space and applies to the following exhibitors:

Pre-packaged Food – food items NOT made on-site Arts/Crafts vendor – items must be at least 50% handmade
Non-Profit Organizations – 501(c)3

<u>Fees</u>	<u># Spaces</u>	<u>Price</u>	<u>Amounts</u>
Exhibitor Booth	_____ x	\$250	= \$ _____
Electric 120v, 20 amp circuit		\$50	\$ _____
Higher voltage may be available for an additional cost		Subtotal	\$ _____

TOTAL Amount Enclosed \$ _____

***PLEASE NOTE THERE WILL BE NO SPACE REQUESTS OR CORNER REQUESTS .**
THERE IS LIMITED VENDOR PARKING SO PLEASE BE PREPARED TO MAKE OTHER PARKING ARRANGEMENTS.

Make Checks Payable to: Brunswick County Chamber of Commerce, PO Box 1185, Shallotte, NC 28459.
Once approved there will be no refunds (no exceptions) **RETURN CHECK FEE IS \$35**



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Please include with your application 2 photos of your wares and EMAIL three 4x6 landscape (not portrait) high resolution photos featuring your product and provide a description of your business or organization and a link to your website or Facebook page below. APPLICATIONS WITHOUT EMAILED PICTURES WILL NOT BE REVIEWED.

We are requesting updated information for our website, please be sure to include the best contact information, where you can be reached during the festival.

Have you been a vendor in this festival before: Yes or No # of years: _____

Web address or Facebook page:

Provide a brief description of your service or product (use back of form if needed):

Signature _____ **Date** _____

The undersigned understands that by failing to abide by the rules s/he may be asked to leave the Festival and no refund will be made.



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40th Annual 2020 NC OYSTER FESTIVAL RELEASE AND WAIVER OF LIABILITY for VENDORS

This Release and Waiver of Liability is executed this date of _____, 2020, by _____ (the "Vendor") and approved by The NC Oyster Festival committee, The Brunswick County Chamber of Commerce and agents.

This Release includes the following terms:

1. **Waiver and Release.** I hereby release and hold harmless the NC Oyster Festival / Brunswick County Chamber of Commerce and its successors and assigns from any and all liability, claims, demands, and causes of action, of whatever kind of nature, either in law or equity, which may hereafter arise from my participation *and the participation of anyone working for me* with the NC Oyster Festival / Brunswick County Chamber of Commerce and/or any project, activity, or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with the NC Oyster Festival / Brunswick County Chamber of Commerce.

I understand and acknowledge that this Release discharges the NC Oyster Festival / Brunswick County Chamber of Commerce from any liability or claim that I may have against the NC Oyster Festival / Brunswick County Chamber of Commerce, with respect to any bodily or other injury, illness, death, or property damage that may result from my participation. I also understand that the NC Oyster Festival / Brunswick County Chamber of Commerce does not assume any responsibility or obligation to provide financial assistance or other assistance, including, but not limited to, medical, health, or disability insurance, in the event of injury, illness, death, or property damage.

2. **Insurance.** I understand that the NC Oyster Festival / Brunswick County Chamber of Commerce may elect to provide group accident or other liability insurance. Any coverage so provided will be governed by the policy language. Except to the extent that it may provide such insurance, the NC Oyster Festival / Brunswick County Chamber of Commerce does not carry or maintain any health, medical, disability, damage, or other liability insurance coverage for the benefit of its vendors, and expressly disclaims any responsibility or obligation to do so.

ALL VENDORS ACCEPTED IN THE 2020 FESTIVAL MUST SUBMIT A CERTIFICATE OF LIABILITY FORM (COI) 60 DAYS PRIOR TO THE FESTIVAL DATE. I AM EXPECTED AND ENCOURAGED BY the NC Oyster Festival / Brunswick County Chamber of Commerce TO MAINTAIN ALL OTHER APPLICABLE INSURANCE COVERAGE FOR MY OWN BENEFIT, INCLUDING MEDICAL, HEALTH, GENERAL LIABILITY, WEATHER/EVENT POLICY TO COVER LOSS OF PRODUCT. **The governing body of the NC Oyster Festival Committee reserves the right to close the festival due to extreme weather or public safety concerns, without refund to vendor. Please plan accordingly to safeguard your wares.**

3. **Medical Treatment.** Except as otherwise agreed to by the NC Oyster Festival / Brunswick County Chamber of Commerce in writing, I hereby release and forever discharge the NC Oyster Festival / Brunswick County Chamber of Commerce from any and all liability claims, demands, and causes of action whatsoever that may arise on account of any first aid or other medical treatment rendered during my participation with



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the NC Oyster Festival / Brunswick County Chamber of Commerce and/or any project, activity, or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with the NC Oyster Festival / Brunswick County Chamber of Commerce.

4. **Assumption of Risk.** I understand that my participation with the NC Oyster Festival / Brunswick County Chamber of Commerce and/or any project, activity, or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with the NC Oyster Festival / Brunswick County Chamber of Commerce may include activities that may be hazardous to me. I further recognize and understand that such participation may involve certain inherently dangerous activities. I hereby expressly and specifically assume the risk of injury or harm in the activities and release the NC Oyster Festival / Brunswick County Chamber of Commerce from all liability for injury, illness, death, and/or property damage that may result.

5. **Photography/Audio Release.** I do hereby grant and convey unto the NC Oyster Festival / Brunswick County Chamber of Commerce rights, titles, and interest in and to any and all photographic images and video or audio recordings made by or on behalf the NC Oyster Festival / Brunswick County Chamber of Commerce, or made with its consent, during my participation in the NC Oyster Festival and/or any project, activity or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with the NC Oyster Festival / Brunswick County Chamber of Commerce, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings. You agree to allow the NC Oyster Festival to use photos, videos on social media, print media, websites and billboards, and all cross media marketing.

6. **Other.** I expressly understand and agree that this Release is intended to be as broad and inclusive as permitted by law, and that this Release shall be governed by and interpreted in accordance with the laws of this state, county, city and/or township. I agree that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release. By signing below, I acknowledge that I have read and understand this Release, and agree to its provisions.

Company Name

Print Representative Name

Signature of Participant/Vendor

Date