

Highlands Business Partnership 2016 Clamfest Retail Vendor Form

Huddy Park ~ RAIN or SHINE ~ *Application Deadline July 8, 2016*

Thursday, August 4 th	6 pm to 10 pm
Friday, August 5 th	6 pm to 11 pm
Saturday, August 6 th	12 pm to 11 pm
Sunday, August 7 th	12 pm to 8 pm

**Four-day event with Local Seafood Restaurants, Live Entertainment,
Children Activities, Crafters, Specialty Vendors,
Thrill Rides, Games and Much More!**

Attendance – Approx. 20,000 over the 4 days.

Retail Vendor Fee: \$450.00 Includes 10 x 10 space with electric.

After July 8th deadline, the fee is \$550.

PLEASE PRINT

Contact Name: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____ Web : _____

New Jersey Sales Tax # _____ (Enclose a copy of your NJST certificate.)

List **ALL** items to be sold or presented and **MUST** submit three photos:

I am applying to participate as a vendor in the above-mentioned promoter's show. I may not be accepted to this show. Acceptance into the show is at the discretion of the promoter. If accepted, I agree to **be open during all hours of the event** and to **offer only the items from above that are approved by HBP**. I will keep my area clean. **Vendors must supply their own TENTS required, TABLES, LIGHTS and OUTDOOR extension cord**. I understand that **all decisions made by HBP Events committee are final**. No refunds and failure to abide by the above rules could terminate my relationship with HBP and any other events. There is a \$25 fee for returned Checks.

Signature: _____ Date: _____

**Mail Check or Money Order Payable to:
Highlands Business Partnership, PO Box 375 Highlands, NJ 07732
Phone 732-291-4713 ~ Fax 732-872-1031 ~ www.highlandsnj.com**

Rev. 12/13 For HBP use: App. Rec. _____ Ck# _____ \$ _____ Accepted _____ Not _____