



**Saturday
August 28, 2010
Fyffe Town Park @ Graves Street
Fyffe, Alabama**

All 12 by 20 foot vendor spaces require a \$50.00 deposit. An additional \$10.00 will be charged for electricity. All spaces will be assigned by the Festival Committee. Your payment rents the assigned space only. No vendor will be assigned a vendor space without a completed Vendor Application form and payment. All applications must be received by August 13, 2010 and no fees will be refunded after August 20, 2010.

In order to provide a diversity of products and to protect vendor's interest, exclusives and limited numbers of various types of vendors will be granted. Please provide a detailed description of your product, along with any special details of product marketing. Only pre-approved products will be permitted. All items must meet the standards of the Festival Committee in terms of appropriateness to the event and good taste. The committee reserves the right to remove items not approved or deemed inappropriate. Exhibitors must abide by the rules and decisions of the committee. Prices should be readily visible. Exhibitors are expected to remain set-up until nightfall.

Each vendor will be responsible for their own drinks and ice this year.

Vendors may begin setting up on Friday, Aug 27, 2010 between 12pm and 6pm. Vendors may also set up Saturday morning, August 28, 2010 (the day of the festival) starting at 6am. No set up will be permitted after 8am the day of the festival. After set up, all vehicles must be moved to adjacent parking lot.

**The Festival Committee and the Town of Fyffe are not responsible for accidents or loss of property
Food Vendors- Please call Alabama Department of Public Health @ 256-845-7031 for requirements.**

MAKE CHECKS PAYABLE TO: Fyffe UFO Days, P. O. Box 8, Fyffe, AL 35971

For More Information, contact Brandi Clayton at Fyffe Town Hall
Phone: 256-623-2222 Ext. 3
Fax: 256-623-7282
E-Mail: fyffetownclerk@farmerstel.com

I, THE UNDERSIGNED, HAVE READ AND AGREE TO ABIDE BY THE RULES DEFINED BY THE FESTIVAL COMMITTEE FOR VENDORS TO THE **FYFFE UFO DAYS FESTIVAL**.

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone Numbers and E-mail if available:

Product or type of Craft: _____

Signed: _____ Date: _____

For more information about our event: www.fyffecitylimits.com.