



**Vendor Registration – Deadline May 31, 2017**

*(Please print or type clearly.)*

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Contact Person’s Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
State ZIP

\_\_\_\_\_  
Phone/VideoPhone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Type of services you provide

\_\_\_\_\_  
Type of products you provide (if any)

Is your company not-for-profit?:  YES  NO

**We agree to abide by the follow rules and stipulations:**

*(Please use your **initials** for each **item**.)*

\_\_\_\_\_ Vendor/Exhibitor assumes all risk and hazard incident to his/her own exhibit/venue or to the vendor’s and representatives, or to other persons in his exhibit/vendor area.

**No electricity provided.**

\_\_\_\_\_ It is understood that the exhibitor/vendor assumes no financial liability pertaining to the Event’s success beyond the cost of his/her exhibit/vendor display area.

\_\_\_\_\_ Exhibitor/vendor is responsible for the safety and cleanliness of their contracted spaces and to pay for any damages incurred with the exhibited space.

\_\_\_\_\_ Only **one** vendor can occupy this booth space. (For shading, bring your own canopy/tent.)

\_\_\_\_\_ Must set up booth by 10am. No booth set up will be allowed after that time. Booth is to be taken down between 4:00 to 5:00pm.

\_\_\_\_\_ Must have the proof of sales license if selling products (application attachment).

\_\_\_\_\_ We will provide (1) 6’ x 18” table with 2 chairs. You may bring table/chairs if needed.

\_\_\_\_\_ Giving out free food samples is prohibited.

\_\_\_\_\_ If selling products, Exhibitor/vendor must complete the Single Day Sales/Vendor Permit application and submit it to Rochester Deaf Festival with a payment of \$25 for the permit fee.

**Payment Information:**

Individual: \$50

Club/Organization w/o exempt status: \$75

Non-profit organization w/ exempt status: \$100  
*\*Proof of Exemption Required*

For-profit small business (under 20): \$150

For-profit big business (more than 20): \$200

**Thank you for your participation  
in the 2017 Rochester Deaf Festival!**

**Pay by PayPal:** Email to rochesterdeaffestival+vendors@gmail.com

**Pay by money order mail to:**

Rochester Deaf Festival

PO Box 93164  
Rochester, NY 14692

\_\_\_\_\_  
Authorized by (print name)

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

**Please Postmark by May 31, 2017**