[Print and complete the application below] Arts by the Sea Festival NEW Limited Food Vendor **Application** Swansboro Arts by the Sea Festival, Saturday June 14, 2025 Festival Hours: Saturday 9:00am - 5:00pm Completed application with signature, payment, photos, and documentation should be MAILED to: Town of Swansboro; 601 West Corbett Ave.; Swansboro, NC 28584 Checks should be made payable to: Town of Swansboro MAKE COPIES FOR YOUR FILES **Please PRINT clearly** Business/Organization: Contact Person:_____Birthdate_____ Address, if changed:_____ City: _____ State: ____ Zip:____ Phone (during festival), if changed: Email (REQUIRED), if changed:_____ Website: NC Sales Tax ID Number:_____ Check number of spaces below (definition of food vendor in vendor guidelines). # of spaces_____ x \$175 = _____ LIMITED Food Vendor [\$175 per 10'x10' space]: # of additional feet_____ x \$18 = _____ Additional foot - \$18 each Total = You must include length of trailer hitch or anything else extending beyond the truck or trailer. Vendors using this application are limited to TWO or less SNACK-type Food items. POWER is NOT provided. Vendors may or may not be located in the designated food areas. Quiet generators are permitted. List and describe all items to be sold:

FOOD PREPARATION IS NOT ALLOWED UNTIL A PERMIT IS ISSUED BY THE ONSLOW COUNTY HEALTH DEPARTMENT.

[attach additional sheets, if needed]

Credit Card Payment – <i>Note: a 2.5% Credit Card processing fee will be added to this transaction.</i> <i>Please ensure that your credit card billing address matches the address you have given us.</i>		
Check ONEVISAMASTERCARDDI	SCOVER	
CARD NUMBER:		
CVV Security Code		
Expiration Date: Month Year		
I hereby authorize the Town of Swansboro to process my credit card for the amount due above.		
Signature	Date	,

I agree to abide by all rules, regulations, and guidelines, presented by the Town of Swansboro. Violators will be subject to dismissal without refund. I agree to the liability/hold harmless statement provided. I understand that the Town of Swansboro reserves the right to deny any application even if the applicant has participated in the show before. I understand that reasonable security will be provided, but I will not hold the Town of Swansboro, or their representatives liable for loss, damage, or injury.

Submission of application indicates that participant hereby indemnifies and shall defend and hold harmless the Town of Swansboro, their employees, and their volunteers from and against all suits, actions, legal or administrative proceedings, claims, demands, damages, liabilities, monetary loss, interest, attorney's fees, costs and expenses of whatsoever kind or nature arising out of the participant's participation in the Festival, including those arising from damage to property or injury to or death of participant, its customers, volunteers, employees, or subcontractors, whether arising before, during, or after the Festival and in any manner directly or indirectly caused, or contributed to in whole or in part, by reason of any act, omission, fault, or negligence of participant or its customers, volunteers, employees, agents or subcontractors.

Further, that the participant releases the Town of Swansboro from any and all liability for loss or damage to property and merchandise used or sold by the participant in the operation of the booth due to theft, fire, storm, flood, and damages through any force of nature or otherwise.

The participant grants the Town of Swansboro permission to use any photographs, motion pictures, videos, recordings or any other record of participation in the Festival.

Signature_____

Date_____

Items to be MAILED with application: Completed Application form, check or money order for total fee due, menu, photos, copy of \$1,000,000 COI.