

CREATIVE COISTRICT • ART WALK EVENT CALL FOR ARTISTS



EVENT DETAILS: Saturday July 27th • 4-10pm IWO OPTIONS TO PARTICIPATE

(Name)	(Business Name)			
(Address, City, State, Zip)				
(Phone) (E	Email)			
The Arts Walk committee will pair you with a participating downtown business. Artists' reception may be held within business from 4-9. Artist participation is optional at restaruant locations. Partner with Business owner to provide refreshments.				
VENCE SPACE in Event Hub Market with stage, music and demos will be location on Cota & 3rd Street. Reserve a space to sell your wares. FEES for 10x10 SPACE: Food Vendors • \$60 Retail • \$30				
ALL Vendors must have proof of Insurance and list City of Shelton and Shelton Downtown Merchants as additional insured for each day of participation. Space is not granted until insurance is provided. *ELECTRICAL HOOK-UPS ARE NOT AVAILABLE. canopys, tarps, booths, etc not provided. *Food vendors must have proper food handlers permit. Using a				
Please describe all items intending to be sold/displayed, include photos of your work.				

Presented by the City of Shelton and the Shelton Downtown Merchants

(Name)	(E	Business Name)		
For and in consideration of the acceptance of this application, the applicant named herein agrees to indemnify, defend and hold harmless the Shelton Downtown Merchants and the City of Shelton, and their respective officers, employees, agents and volunteers from any loss, damages, expenses or injury; together with reasonable attorney fees to person/persons and/or private property covered by or connected with the operation and/or behavior of applicants unit in connection with festival activities. Applicant will provide: Proof of insurance and list City of Shelton and Shelton Downtown Merchants as additional insured for each day of participation. Food handlers permit, if applicable.				
I have read and agree to the rules outlined on this application and with the instructions provided. By signing below I also agree to abide by the rules and regulations provided.				
(Signature)		(D	ate)	
CONTACT: sheltondowntownmerchants@gmail.com				
TOTAL AMOUNT ENCLOSED				
	\$	LNOLOGED		
	T	<u> </u>		
	DATE			
FOR EVENT USE ONLY				
Date Rec'd		Amount Paid		
ARTIST	SHOWCASE	VENDOR S	SPACE	
	#Vendor ID			