



SAN JACINTO DAY FESTIVAL AND BATTLE REENACTMENT

SATURDAY, APRIL 20, 2013, 10AM - 6PM.

VENDOR APPLICATION

PLEASE PRINT

Company Name: _____
(Print how you wish your name to appear on signage and all publicity for the event.)

SALES TAX# OR SOCIAL SECURITY# _____

Contact name: _____

Address: _____
(If mailing address is PO Box number, physical address also required.)

City & State: _____ Zip: _____

Email: _____

Phone Number: (_____) _____ Cell Number: (_____) _____

Web site (if applicable) _____

Category:

- Commercial Sales--\$145 (Vendor who will be selling historical materials for profit)
- Demonstrators with Commercial Sales--\$75 (Vendor who performs, displays or demonstrates historical activities AND will be selling materials for profit)
- Exhibitor/ Entertainment --\$0 (Exhibitor who dresses in period attire and performs, displays or demonstrates historical activities. NO SALES. However, there is a \$50 signage fee if the Museum needs to purchase a new booth banner.)

Type of items to be sold, displayed and/or demonstrated: _____

Tell us about your past festival experience. Include name of festival, location, date and contact:

Set-up.

Each rental space is 12' x 12' with one pop-up canopy per spaced if needed. Signage is provided.

Number of spaces: ____ x Cost (see above): \$ _____ = Total \$ _____

How many chairs do you need? ____ How many tables do you need? ____

Payment Method:

- _____ Company check (NO personal checks)
**Please make checks payable to San Jacinto Museum of History Association*
- _____ Money order
- _____ MasterCard
- _____ Visa
- _____ Discover
- _____ American Express

Credit Card Information*:

Account #: _____ Expiration. Date: _____ CVB# _____

Name as it appears on the card: _____

Cardholder's Signature: _____ Date: _____

I have read the 2013 San Jacinto Day Festival Vendor Information and agree to the terms and conditions thereof. This contract must be signed and dated to be considered by the San Jacinto Day Festival Committee.

Signature: _____ Date: _____

Print Name: _____

Company Name: _____

**If you wish to give the credit card information over the phone, call Sellmark 210-824-9474. You will receive a notice to confirm your payment and reservation.*

Please fax or mail a copy of this application to Sellmark.

Fax number: 210-824-9318

Mailing address: Sellmark

Attn: San Jacinto Day Festival
909 NE Loop 410, Suite 717
San Antonio, TX, 78209

Questions can be directed to associate@sellmarkusa.com or call Sellmark at 210-824-9474.