



## Booth Registration Form

To reserve a booth vending in the Horace Bean Days please submit the Booth Registration Form.

Number of Booths \_\_\_\_\_

Today's date \_\_\_\_\_

(Registration Fee: \$50.00 for Food Vendors \$25.00 for other Vendors No Charge for Non-Profit Organization)

Total Amount: \_\_\_\_\_ Cash Enclosed: \_\_\_\_\_ Check Enclosed: \_\_\_\_\_  
(Checks Payable to Horace Bean Days)

Food Vendor: Yes \_\_\_ No \_\_\_ Contact Person: \_\_\_\_\_

Business Organization/Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Sales Tax Permit: \_\_\_\_\_ State: \_\_\_\_\_

Booth Description and Activities (use additional sheet, if needed):  
\_\_\_\_\_  
\_\_\_\_\_

I(We), \_\_\_\_\_, hereby release Horace Bean Days and all parties involved with the planning, organizing, and staging of the festival from damage and/or personal injury inflicted or incurred during the Horace Bean Days. I (We) have read the Horace Bean Days agreement and commit to fulfill all requirements. We also give consent that picture and/or videos, including representatives of our organizations, may be used for promotional purposes.

Participant Signature

Date

**Mail with payment to:**

**Horace Bean Days**

**215 Park Dr. E**

**Horace, ND 58047**

Email: [horacebeandays@cityofhorace.com](mailto:horacebeandays@cityofhorace.com)