

FLATBUSH BROOKLYN***

CHURCH AVENUE FESTIVAL

WHEN: SUNDAY, MAY 5TH, 2019

NYC DOES NOT ALLOW RAINDATES

TIME: 10 AM to 6 PM

LOCATION: CHURCH AVENUE – CONEY ISLAND AVENUE TO ARGYLE ROAD - BROOKLYN

PLEASE PRINT NAME: _____

ADDRESS: _____

CITY OR BOROUGH: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: _____ OTHER: _____

TYPE OF MERCHANDISE (BE SPECIFIC): _____

NEW YORK CITY CONSUMER AFFAIRS LICENSE PERMIT NUMBER: _____

CONSUMER AFFAIR LICENSE START DATE _____ LICENSE EXPIRATION DATE _____

NEW YORK STATE SALES TAX I.D. NUMBER: _____

EARLY REGISTRATION RATE APPLIES TO PAYMENT RECEIVED BY APRIL 5TH

EARLY REGISTRATION FEE: General Vendors - \$115 - Food Vendors - \$250 - Corporate Fee - please call

LATE REGISTRATION FEE: General Vendors - \$125 - Food Vendors - \$275 - Corporate Fee - please call

SPOT SIZE: 10' Deep by 10' Feet Long

PLEASE NOTE:

1. PLACEMENT FOR SPACE IS ON FIRST PAY, FIRST SERVE BASIS.
2. **SETUP STARTS AT 9AM.**
3. ALL FEES ARE NOT REFUNDABLE. THERE ARE NO RAIN DATES
4. **DUE TO N.Y.C. REGULATIONS – VENDORS MUST PROVIDE A NEW YORK CITY CONSUMER AFFAIRS I.D. NUMBER** AND NEW YORK STATE TAX I.D. NUMBER. FOOD VENDORS MUST OBTAIN A HEALTH PERMIT.
5. FESTIVAL IS SUBJECT TO MAYOR'S OFFICE FINAL APPROVAL
6. MAIL CONTRACT TOGETHER WITH MONEY ORDER (**NO CHECKS**) TO:

METEOR FESTIVALS

PO Box 205001

Brooklyn, New York 11220

For information: 718-444-6028 or streetfairsny.com

The undersigned Exhibitor/Vendor hereby acknowledges that he/she has read application and accepts all of its terms and conditions.

SIGNATURE _____ PRINT NAME: _____

DATE: _____ EMAIL _____