

Community Service Organization Application 2010

Organization Name _____

Organization Address _____ Tax I.D. # _____

City: _____ State _____ Zip _____

Contact Person _____

Phone _____ Fax _____ Cell _____

Please list the types of merchandise* or literature you desire to sell, hand out or display:

*All items are subject to approval by Arab World Fest. Restrictions may be placed on the types of items allowed for vending. Organizations are limited to promote their products and their ideas within the immediate vicinity of their booth.

Community service booths will be located in a section of our marketplace. This site has a roof over it, overhead lighting, and accessible electrical outlets. There may or may not be exterior walls so the area is readily visible to festival attendees. However, you may wish to bring protection in case of strong winds or heavy rain. Festival entry passes and parking permits will be issued one to two weeks prior to the festival.

Fees: The \$275 registration fee is for one 12 foot wide by 10 foot deep space for your organization's booth at our festival. This is a price that we are offering only to non-profit organizations. Included in this fee is the use of one 8 foot x 30 inch banquet table and 2 vinyl folding chairs. Extra rental tables and chairs can be ordered with this application. Table coverings are not provided.

Please indicate quantities desired below:

Item:	Number desired	Fee per each	Extended price
Booth Space, 12' x 10'		\$275	
Extra Tables, 8' x 30" banquet		\$10	
Extra Chairs, vinyl folding		\$2	
		Total fees:	

Acknowledgment: I authorize investigation of all statements contained herein. I understand that misrepresentation or omission of facts is cause for automatic rejection or cancellation. I further understand that this application is subject to approval of Arab World Fest's organizers, Arabian Festivals, Inc.

Signed by: _____

Date: _____

Please return completed application with your check to:

Arabian Festivals, Inc.
P.O. Box 517
Milwaukee , WI 53201

Do Not Write Below This Line

Date Received _____ **Certified Check/Money Order** _____

Amount Received \$ _____ **Booth number(s)** _____

Name of Vendor _____

Number of extra tables _____ **Number of extra chairs** _____

Received by: _____