

**Charm City Fetish Fair
APPLICATION FOR VENDOR SPACE**

Please complete this form and mail with your business check or money order to:

CCFF c/o BESS
P.O. Box 3141
Catonsville, MD 21228

Email for Information: vending@charmcityfetishfair.com

Business Name: _____

Legal Name of Owner: _____

Badge Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____

Email: _____ Phone: _____

Number of Booth Rentals: _____

Phone Hook Up (Please specify # of lines needed): _____

Electric Hook Up (Please specify # of hook ups): _____

Curb side unloading will be limited to 15 minutes per booth space. Do you need unloading time?
(circle one) YES NO

Do you need assistance unloading? (circle one) YES NO

What type of products do you sell? _____

(We will make every attempt possible to ensure that two vendors with like merchandise are not next to one another.)

Item Donation for Silent Auction (Optional -- your name will appear on auction card as Donor.)
YES NO

Total Amount Enclosed: _____

Payment Type (in U.S. Dollars) (Please circle one): Business Check or Money Order Only

Receipts are mailed within 5 business days after receipt of payment.

By my signature below, I certify that I am at least 21 years of age, and all staff working in my booth will be at least 21 years of age. I will hold harmless Ramada BWI Airport, Hanover, Charm City Fetish Fair, BESS, and all agents, employees, and staff. I agree not to distribute or sell any items banned for sale by all state, local and federal laws of the United States.

Signature: _____ Date: _____