

Evans Memorial Hospital
VENDOR APPLICATION

Arts, Crafts and Yard Sale
August 5, 2017 – 7am – 10 am

Funds will benefit the Evans Memorial Hospital Employee Fund for the Patient Television Fund.

To be completed by Personnel

Personnel Name: _____

Phone #: _____ Department: _____

Item(s) to be sold: _____

To be completed by Non Personnel

*Non personnel also includes any family member of personnel
(i.e., father who makes items out of wood; child sells Mary Kay; sister sells jewelry, etc.)*

Name: _____

Phone #: _____ Email: _____

Address: _____

Item(s) to be sold: _____

Instructions and Information:

- *Submit completed application to Lisa Ryles by 12 noon, Monday, July 31st. Personnel should also submit \$10 and non-personnel \$20 with their application for the space. Vendors keep the proceeds from their sales.*
- *Set up time 6am – 7am; Sale time 7am – 10am*
- *All approved vendors will receive a 12X12 space.*
- *Vendors must provide their own tables, chairs, tents, etc.*
- *Vendors/designee are to remain in their space at all times (with the exception of bathroom breaks).*
- *Vendors will be responsible for dismantling and removing all materials used in their area and returning the space to its original condition by between 10:00 and 11:00 am that afternoon.*

LIABILITY: As legal representative of the above named vendor, I agree to defend and hold harmless Evans Memorial Hospital, Inc., its officers, directors, employees, agents, contractors and subcontractors, jointly and/or severally, for any and all liabilities, injuries, damages, sickness, claims, costs, and/or claims of malfeasance resulting from the making, preparing, selling and/or distributing of my products/services to the general public.

Signature: _____ Date: _____

Do not write below this line

Approved Approved with below changes Not Approved

Comments: _____

Signature: _____ Date: _____