



**The Corey James Memorial Good Time Benefit, Inc.**  
**2434 Hudson Road Suite 133 Greer, SC 29650**  
**theGTB@goodtimebenefit.com**  
**864-395-2463 - Contact Dawn**  
**864-349-1509 – Fax**



**Booth Space, Vendor, Exhibitor Application**  
**April 27, 2019**

Please fill out application and submit via email, fax or mail. Confirmation will be e-mailed to you.

Name and Address: \_\_\_\_\_

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

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

Website: \_\_\_\_\_

Description of Products being sold or Services Provided: \_\_\_\_\_

If your booth is under a tent or canopy, specify size of tent/canopy: \_\_\_\_\_

Do you need electric hookup? YES / NO (Note: 15 Amp Only)

Do you have any special needs or special request that have not been addressed elsewhere? If so, Please explain: \_\_\_\_\_

**SPECIAL INFORMATION FOR VENDORS AND EXHIBITORS**

**Set-up:** Begins at 11am Saturday. Tables are to be covered and canopies free standing. NO ANCHORS IN PAVEMENT. As a courtesy to all vendors/exhibitors, booths are to remain in place a minimum of 1:00pm-7:00pm on Saturday.

**Exhibitor Terms:** Compliance with applicable state or federal laws is the responsibility of the exhibitor (i.e. collection of sales tax). Submission of an application is an implied agreement to abide by the rules set forth herein. No rain date! Festival sponsor is NOT RESPONSIBLE for accidents, damages or other loss incurred by exhibitor.

**Booth Fees**

**\$75.00** - Includes: (1) Table, (2) Chairs

**\$100.00** - Includes: Electricity, (2) Table, (2) Chairs

By signing below, I acknowledge having read the attached TERMS and I understand and agree to be bound by these terms.

\_\_\_\_\_  
Signature of Authorized Person Title

\_\_\_\_\_  
Printed Name of Person who signed above Date Signed