

VENDOR APPLICATION



Organization Name: _____

Address: _____

City: _____

State: _____

Zip code: _____

Email: _____

Contact Person: _____

Phone: _____

Website: _____

Briefly explain the purpose of your booth (ie selling goods, giveaway literature, raise awareness, etc): _____

Number of tables needed for your booth (ONE is included): _____

If you have any questions about Uprise Festival, the application process, or any other entity of vending, please contact Julianne Hayhurst, vendor supervisor:
julianne@upriseeventslive.com or 717-713-4307

VENDOR CONTRACT

I understand the booth agreement present above, and if accepted, I agree to comply with the said contract.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

Friday-Saturday, September 13th and 14th, 2019
Shippensburg Fairgrounds, Shippensburg, PA

PAYMENT

Please include:

Application and Contract
\$500 check (plus \$10 additional per table, if applicable)

Checks Made Payable to:
Uprise Events Live, Inc.

Send to:
Uprise Festival
Attn: Julianne Hayhurst
PO Box 82
Shippensburg, PA 17257

MORE THAN JUST A MUSIC FESTIVAL, IT'S AN EXPERIENCE