PBS / Boo	oth No.	
Paid	Electricity	
(For office	ce use)	

RIP'S RIBS VENDOR BOOTH ENTRY FORM

Name of Booth	Cor	ntact Name	
Address	City	Zip	
Phone (day)	(night)	(cell)	
e-mail			

NOTE: COOK-Off will be the Saturday, April 12, 2025. The ABSOLUTE deadline for applications one week prior to the event. (Every effort will be made to accommodate your request for a booth if the application and payment are received after the deadline.)

Vendor Booth Category (Select (1) category. Limit (2) booths.):

- A. _____ \$40 Non-Profit (Organization, Club, or Church)
- B. ______\$60 Business, Healthcare, Hobbyist, or Political
 C. _____\$60 Drinks and/or Snacks (NO FOOD VENDORS OR FOOD TRUCKS)

Booth Type (select a	all that apply):	Informatio	nal Sales	Games
Please describe your	booth in detail (See attached '	Booth Regulation	s".)

Texas Sales and Use Tax Permit ID Number ____

(If none, please provide information regarding your exemption from sales tax permit laws)

We need (1 or 2)	booths at \$each. Tot	al booth fee is \$
	Total Amount Enclosed	\$
For more i	nformation call 254/629-2332 or	• Toll Free 1-877-265-3747
	Or email us at <u>chamber@ea</u>	
Booth assignments wil	I be available online at <u>www.ripsribs.com</u> ,	, the week leading up to the event.
Payment:	Check Cash M	loney Order
-	ble to: Eastland Chamber of Commerce	,
-	209 W. Main, Suite A, Eastland, T	X 76448
I have read the b	ooth regulations on the next pag	e and will abide by them.
<u>.</u>		
Signed		Dated
l am a: Repeat Vendor	New Vendor	Dated