

VGMS Spring Gem, Mineral & Jewelry Market May 16, 17, and 18 Vendor Contract

Location: Antique Gas & Steam Engine Museum, 2040 N. Santa Fe, Vista Ca, 92083 Times: Friday and Saturday 10:00 am - 5:00 pm, and Sunday 10:00 am – 4:00 pm Vendor Set Up: Thursday, beginning at 11:00am

Please note the following rules and requirements: Vendor will assume responsibility for all set up or installation, take down, and removal of their merchandise. Breakdown and clean-up begin <u>after</u> the raffle at 3:00 pm on Sunday, and must be completely finished by 6:00 pm, except for those staying overnight. Vendors are responsible for all clean up and for any damage to their space. No vendor may assign or sublet any space without permission of VGMS. Merchandise offered for sale to the public must be correctly represented and labeled. It is the vendor's obligation to comply with all state and local laws and regulations. VGMS and/or AGSEM will not be held liable for losses due to fire, theft, natural disasters, breakage or damage of any kind. Vendor assumes responsibility for obtaining independent insurance.

- Location is DRY CAMPING ONLY. Water and restrooms are available on site. No tables or chairs will be provided.
- Pets must be on a leash on museum grounds. No open fires are permitted. No alcoholic beverages are permitted during show hours.
- This is an OUTDOOR SHOW, rain or shine. There are NO INDOOR SPACES.

Reservations are required. Booth spaces will be assigned on a first-come, first-served basis.

Booth space sizes: single 20x20 feet, double: 20x40 feet, with approximately 6 feet between.

FEES ARE: \$200 PER SPACE, \$400 FOR DOUBLE

	PLEASE CHECK ONE: SING	LE DOUBL	.E
All vendors	are asked to provide a raffle i	tem for each space	by early Friday morning.
		be charged a \$35.00 fee.	
For additio	nal information please email info@vista	arocks.org with the word	"Vendor" in the subject line.
VENDOR NAME:			
BUSINESS NAME:			-
STATE TAX ID# OR SELLERS	?ermit #:		
MAILING ADDRESS:			
CITY:		STATE:	ZIP:
PHONE:	EMAIL:		
SPACE REQUESTED (Please sp	ecify 1 st and 2 nd choice. We will do o	our best to accommoda	te requests.):
I HAVE READ AND UNDERSTAN	D THE ABOVE CONTRACT AND AGR	EE TO FOLLOW THE RU	JLES AND REQUIREMENTS SET FORTH.
SIGNATURE:		DATE:	
PLEASE SIGN U		AROCKS.ORG	EMAIL YOUR CONTRACT TO
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Make check or money order payable to: VGMS. Mail to: VGMS, 1930 Watson Way, Suite B, Vista, CA 92081. PLEASE KEEP A COPY OF YOUR CONTRACT AND METHOD OF PAYMENT AS YOUR RECEIPT