

## HAZON PHILLY FOOD FESTIVAL VENDOR CONTRACT & REGISTRATION FORM

| Thank you for registering to be a vendor at the Ha   | azon Jewish Food Festival!   |  |
|--|--|--|
| This agreement is made thisday of<br>and   |  | tween the Hazon Philly Food Festival                               |
| The following memorializes all of the terms of the agreement between the parties:  |  |  |
| 1. Vendor agrees to provide goods/merchandise 20, 2013, in the lower level of <b>Rodeph Shalom</b> , 6 arrive between 10:30 & 11:30AM.   | 515 N. Broad Street, Phila   | delphia PA 19123. Vendor should                                    |
| 2. A brief description of the goods/services being   |  | 5:   |
| 3. Representative(s) of the Vendor will be:  |  | and  |
| <b>4.</b> Vendor agrees to pay a non-refundable depindudes   |  |  |
| day, all trash will be disposed of and the stall will be  6. A check in the amount of \$, made pa memo line), must be received from the Vendor Attention Liz Traison, 125 Maiden Lane, Suite 8B, N  7. All vendors must provide proof of business i Insurance certificate should be mailed to Hazon of Attention Liz Traison, 125 Maiden Lane, Suite 8B, N | nyable to Hazon (with "Philad<br>r no later than 9/15/2013.<br>New York, NY 10038.<br>Insurance with Hazon and<br>no later than 10/1/2013. Cer | All checks should be mailed Hazon, Rodeph Shalom as added insured. |
| VENDOR:  |  |  |
| Name of Vendor Organization/Co   |  |  |
| Vendor email:  |  |  |
| Vendor phone number:   |  |  |
| Enclosed check amount:   | (For profit: \$100/Nor   | n-profit: \$50)  |
| Representative's Printed name:   |  |  |
| Representative's Signature:  |  |  |
| Date:  |  |  |
| Hazon Philly Food Festival:  |  |  |
| By:  |  |  |
| Date   |  |  |

