2008 MACOMB HERITAGE DAYS
JUNE 26-28
CONCESSION PERMIT APPLICATION AND CONTRACT

(Please Print)
ORGANIZATION/BUSINESS_____

CHAIR/CONTACT PERSON_____

ADDRESS OF CONTACT PERSON_____

CITY_____ STATE_____ ZIP_____

TELEPHONE # Day ( )_____ Evening ( )_____

MENU (Include food and/or drink items, hot and/or cold, and type of cooking facilities):
_____
_____
_____

What type of ELECTRICAL HOOKUP do you require? _____
(Please be specific)

Describe site vehicle model/make_____ Color_____

Trailer Size _____ Tent Size_____ License Plate # _____

Size or area or special needs requested for concessions_____
_____

Site Application Fee is $150.00 & NON REFUNDABLE.

The site application fee **MUST** be submitted with your application.
Please make **checks payable** to: **MACOMB HERITAGE DAYS**

PLEASE REMIT TO: **Macomb Area Convention and Visitors Bureau**
By 4/13/2007 **201 South Lafayette Street**
Macomb, IL 61455

You will receive a copy of this contract with the site assignment on it. Please display this in your booth.

- ☐ I (We) agree to provide 10% of gross sales each day.
- ☐ I (We) agree to comply with the food service regulations of McDonough County Health Department.
- ☐ I (We) agree to provide proof of insurance as a concession.
- ☐ I (We) agree to be responsible for any clean up and/or permanent damage to my (our) assigned area.

_____ _____
On-site Booth Manager **Heritage Days Chairperson**

In case of any legal dispute, Illinois law will prevail.