

29th Annual Taste of Melrose Park

708-343-4000 ext.4448

Information Row Application

20__

\$500.00 includes 10x10 Tent with electric, 2 tables and 2 chairs

Information row is not allowed to SELL any product, but PROMOTE your business...giveaways is fine as is a raffle. All giveaways need to be approved ahead of time. Spaces are limited!

(PLEASE PRINT CLEARLY)

BUSINESS NAME FOR SIGNAGE _____

Contact Person _____

Address _____ **Town** _____

Zip Code _____ **Contact Number** _____ **FAX** _____ **Email** _____

Numer of Spaces Needed - _____

Certificate of Insurance is needed adding the Village of Melrose Park as the additional insured! It needs to be sent back with payment and copy of this application. No booth will be allowed to open w/o the certificate.

I, the above exhibitor agree to hold harmless the promoter, The Village of Melrose Park from any liability, loss or damage to any item or member, I abide by the rules and regulations and assume responsibility for my displays and items.

Signature of contact person above _____ **Date** _____

Make Check, Money Order or Cashiers Check payable to: Taste of Melrose Park

1000 N. 25th. Ave, Melrose Park, IL 60160

Thank you for your Support!

Peggy DiFazio-Director of Special Events, Senior Service & Taste of Melrose Park

