



Autumnfest
LOGANVILLE

Come Join Us!
Saturday, October 20
9 a.m. to 4 p.m.

City of Loganville AutumnFest Exhibitor Application

Applicant's Name: _____

Applicant's Title or Position in business/organization: _____

Business/Organization Name: _____

Website: _____

Category: (check one)

Artist/Craft

Food : (circle one) Mobile Food Unit Prepared Food Food Cart Packaged Food

Education/Non-profit (301 or 501 status)

Non-food vendor/business

Briefly describe business or organization: _____

Business Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

Telephone: Day _____ Evening _____

Please give the first and last name of staff that will be operating your rental space: (We ask that you have your booth manned at all times. The City of Loganville and Festival Staff will not be responsible for your products and/or booth.)

1. _____ 2. _____

3. _____ 4. _____

Vendor set up will be in the morning of 10/20/18 (between 6 a.m. & 9 a.m.). You will receive a designated set up time prior to the event.

Please describe the activities/information/food you plan to have at your booth:

Please be sure to include all current contact information, we may contact you for more details regarding your application. Please mail in your application along with your payment.

Submit this application and \$65 Exhibitor fee or \$75 Exhibitor fee with power, by October 5, 2018, City of Loganville P.O. Box 39, Loganville, GA 30052. Email questions to kpeters@loganville-ga.gov