

For Office Use Only

Check # _____

Amount: _____

Rec'd: _____

Location: _____

Booth # _____



Non-Profit Vendor Registration Contract

Company/Organization

Contact Person

Address

City/State/Zip

Phone/E-mail

Sales Tax Number: _____

Detailed description of activities, information or goods for sale:

_____ Waterfront Park (\$75 for 10' frontage)

_____ Library Park (\$50 for 10' frontage)

_____ Extra Space Needed (\$50/flat fee)

_____ Water (\$25)

_____ Electric (\$50)

_____ Trash Removal (\$35)

_____ Late fee (\$25) if after 6/1

_____ TOTAL

Total payable to Main Street Bath
before June 1, 2010 or add \$25 late
fee.

Your signature indicates that you have
read and will comply with the Vendor
Contract information.

Signature: _____ Date: _____

Main Street Bath
15 Commercial Street
Bath, Maine 04530
207-442-7291 (phone) 207-442-9481 (fax)