

BINGHAMTON'S LARGEST



APPLICATION – Pick One:

\$50 Garage Sale Vendor	\$50 Craft Vendor
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Return completed paperwork and payments to Debbi Miller, Townsquare Media, 59 Court Street, Binghamton, NY 13901 via mail, Email: Debbi.Miller@TownsquareMedia.com or Fax: 607-772-9806. Deadline: Monday, March 26, 2018 or until all spaces are sold out.

Payments Accepted: Credit Cards, Cash, or Money Orders Only.

Business Name	Contact Name		
Address	City	State	Zip
Telephone	Email		

NYS Sales Tax Number (If applicable). Vendor is responsible for collecting NYS Sales Tax.

You will be provided with an 8 foot wide and 10 foot long space at Oakdale Mall and one (1), 6-foot covered table in your space. If you bring additional table(s) they must be topped/covered – no exceptions. Please stay within your designated space. Tables will be assigned the morning of set up. We cannot block walkways or entrances due to fire and safety regulations. Electricity is not provided.

Please list the items you will be selling at your location -- attach an additional page if needed.

Agreed to by:

Name	Date
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With
Townsquare Media

We are pleased that you will be participating in Binghamton's Largest Indoor Garage & Craft Sale.

Our insurance carrier insists that you acknowledge, by your signature on this letter, that you, your heirs, administrators and assigns, do now, and will forever hold harmless WHWK, WAAL, WWYL, WNBF and WYOS, Townsquare Live Events, LLC, Townsquare Media, all of their affiliates, and all of their officers, shareholders, directors, agents and employees and all of their predecessors, successors, heir and assigns from and against any and all claims arising from your participation, including but not limited to, claims relating to the arrangements made by us for you, booth space, electricity, and any and all other events, activities and occurrences in which you are involved.

Please acknowledge receipt of this letter, and your acceptance of its terms, by signing this letter, and returning it to us.

The undersigned has (have) read the contents of the above letter and acknowledge my (our) understanding of its contents and import, and my (our) acceptance of the "hold harmless" clause contained therein.

Agreed to by:

Client Signature

Print Name

Date

Advertiser Name



Credit Card Authorization Form

Customer Name (as it appears on Credit Card)

Billing Address

Zip Code

Account Number

3-Digit Code

Exp. Date

Dollar Amount

Advertiser Name

Client Signature

Date



Payment Type (Check One):

Discover Card

MasterCard

Visa

American Express