



VENDOR APPLICATION
 15th Annual Eagan Art Festival
 June 27 & 28, 2009
 Eagan Community Center Festival Grounds



Application must be completed in full and returned with payment.

Please type or print clearly.

BUSINESS NAME: _____

CONTACT NAME: _____

ADDRESS: _____

(Street) (City) (State) (Zip)

PHONE NUMBER: _____

(Home) (Business) (Fax)

E-MAIL ADDRESS: _____

MINNESOTA SALES TAX ID NUMBER: _____

FEDERAL TAX ID NUMBER: _____

FEES:

Description	Price	Quantity	Total Amount
Space Fee - 10' x 10'	\$375.00	_____	\$ _____
Additional Space – 10' x 10'	\$375.00	_____	\$ _____
Electric Power Fee:			
20 amp	\$50.00	_____	\$ _____
50 amp	\$100.00	_____	\$ _____
20 amp (add'l)	\$50.00	_____	\$ _____
50 amp (add'l)	\$100.00	_____	\$ _____
Sanitation - Damage Deposit	\$50.00		\$ 50.00
			=====
Total Due (Please make checks payable to: Dakota Center for the Arts)			\$ _____

Authorized Vendor Signature: _____ Date _____

Mailing address is:
 Dakota Center for the Arts
 Attn: Festival Manager
 PO Box 211609
 Eagan, MN 55121-1609