



OBSN 2024 Powwow Vendor Application Form

This is an application to become a vendor at the **Occaneechi Band of the Saponi Nation 2024 Powwow** on October 12-13, 2024. Please complete, sign, and return the application.

Name: _____ Cell Phone: _____ Email: _____

Tribal Affiliation: _____ Website: _____

Business Name (if applicable): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Additional Vendor Information:

Please list up to four potential items to be sold:

Vendor Fee: \$150.00 for two days and \$75.00 for one day. Please indicate how many days you will be vending. Please note that we do not collect the fee upfront. If you would like to mail a check, the address is indicated below.

Two days One day. Tent Size: _____

Please indicate if you need the following:

Electricity Water (Usually reserved for food vendors).

Please make a checkmark next to each statement to declare your understanding:

1. Set up for vendors will begin Wednesday, October 9, 2024, at 12:00 PM. Food vendors will manage their own grease/oil disposal. All vendors are expected to offer items for sale that are proper and respectful. The committee reserves the right to remove items considered unsuitable for our event, i.e., toy guns, carnival toys, fireworks, and items made in China.
2. We provide 100-volt amp service for low-wattage use. Generators are allowed. Vendors needing electrical service greater than that provided should contact the committee. We may not be able to accommodate a higher service. For emergency vehicles, vendors will be a minimum of two feet from the vendor circle. This includes overhead awnings, trailer canopy, and flip-outs.
3. Absolutely no alcohol, weapons, firearms, smoking, or illegal drugs, and you must have identification for service animals.
4. Vendors are required to clean up their space after the event.

RELEASE OF LIABILITY

With the signature of this application, I, the undersigned, intending to be legally bound, hereby for myself, waive and release any rights and claims for damages I may have against The Occaneechi Band of the Saponi Nation, their representatives, successors, and assigns for any injuries suffered by me in this event. Further, I hereby grant full permission or authorized agents to use any photographs, videos, recordings, or any other record of this event for any legitimate purpose.

I HAVE READ AND FULLY UNDERSTOOD THE ABOVE HOLD HARMLESS AND INDEMNIFICATION AGREEMENT.

Signature: _____ Date: _____

*Space is limited; all applications may not be accepted. In order to ensure your spot, return this application as soon as possible. You will be contacted upon the application approval. If you have any questions, you may contact **Vickie Jeffries** (see contact info below).*

Please submit a completed application by email or mail to:

Vickie Jeffries, Tribal Administrator/Powwow Chair
Email: Vickie.jeffries@obsn.org
Direct Tel: (336-684-6270)
OBSN
PO Box 356
Mebane, NC 27302

Office Use Only:

Application approved.

Payment received: _____

Amount: _____

Cash/Check

Authorized signature: _____ Date: _____