

VENDOR APPLICATION

COMPANY NAME							
CONTACT NAME							
ADDRESS							
CITY/STATE/ZIP							
PRIMARY PHONE (CIRCLE: WORK, HOME, CELL)							
SECONDARY PHONE (CIRCLE: W	/ORK, HOME, CELL))					
	PRODUCTION INFORMATION (CIRCLE ONE)						
BOURBON	BEER	WINE	FOOD				
NUMBER OF ANTICIPATED STAFF MEMBERS				SPONSOR			

LIST ITEMS YOU WILL HAVE AVAILABLE	TO SAMPLE (INCLUI	DE BOURBON BRAN	IDS)	
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LIST SWAG ITEMS YOU ANTICIPATE TO I	RRING			
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SPECIAL NEEDS OR COMMENTS				

I agree to abide by the rules stated. I understand that all promotion of my product(s) must take place within the confines of my booth. I understand that Columbus Pro Musica, Inc., d/b/a Columbus Indiana Philharmonic, and its
INITIAL representatives are not responsible for or liable for any damages including, but not limited to, loss suffered before, during, or after the event as a result of the display of my product, equipment or materials. In the event of severe weather conditions, I understand it is my responsibility to secure my space in order to ensure the safety of my staff and all event attendees. I further understand that for each poured sample, my staff, with the help of an event volunteer, must hole punch the attendee passport. It is my sole responsibility, as a licensed alcohol server, to acknowledge when an attendee has reached the consumption limit and should not receive additional alcohol samples. In the case of a disorderly guest, I will contact event staff to address the problem.
I grant the Columbus Indiana Philharmonic and its representatives permission to take photographs of me and my property in connection with my participation at the 2024 Bourbonfest event. I authorize the Columbus Indiana Philharmonic,
INITIAL its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that the Columbus Indiana Philharmonic may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.
PRINT NAME
SIGNATURE
DATE