

Deck the Halls- Holiday Bazaar

Vendor Registration Form

November 14th & 15th , 2025 Friday 4-8 PM | Saturday 9-3 PM

Contact:	Name of Business:	:	
Address:	City:	State:	Zip:
Cellphone:	Email:		Website:
Texas Sales & Tax Permit: Types of Items to be Sold:			
Booth Space Requested:			
☐ 10' X 10' Inside Aisle booth	\$100.00 🗆 10' X 15' bo	ooth \$175.000	
\square 10' X 10' End of Aisle Booth	\$125.00 🗆 Electricity		
Additional Information			
 Event Location: Mount Pleasan Set Up: To be determined. The Spaces: The facility will furnish chairs, extension cords, etc. Ad Layout: Booths are reserved on and payment have been receive Because this event is marketed sale. This event reserves the right to inappropriate for family viewing event. The event reserves the r Texas Sales & Tax Permit: Vend have a Sales & Tax Permit, you www.window.state.tx.us More Information: Marifer Zun Deadline: November 1st, 2025 	as a shopping event, we will not accer reject any application or item listed of g. Items which are not listed on your ight to inspect booths at any time dur- dors are solely responsible for the rep- can contact the Comptroller's office be- liga (903) 572-8567 I events@mtpleasettx. I oted via email: events@mtpleasanttx.	Avenue, Mount Pleasant, TX is set up day (usually the Thurs space. Vendors will need to request based on availability paces will not be reserved usept booths that only display on a vendor application which application will not be allowed in the event to ensure corporting and payment of tax aboy calling (936) 634-2621 or santtx.com	rsday before day of event). be bring any additional tables, ty. ntil your completed application information with no products for the is deemed unsafe or considere yed to be displayed or sold at the mpliance. applicable to sales. If you do not visiting their website,
Release of Liability			
The Mount Pleasant/Titus County C Chamber or Deck the Halls will not releases the Chamber and those in	be responsible for injuries or da	mages at the event. Eac	h participant expressly
Signature:	Date: _		
Office Use Only			

Date Received: _____ Amount Paid: _____ Payment Type: _____