



9th Annual Smokin' in the Square

BBQ Cook-Off

March 16-18, 2018

Vince J. Whibbs Sr. Community Maritime
Park, Pensacola, FL

Arts & Crafts Vendor Application

Website: smokininthesquare.com

PLEASE NOTE VENUE CHANGE



**KANSAS CITY
BARBECUE
SOCIETY** ★

PLEASE COMPLETE AND RETURN NOT LATER THAN MARCH 7, 2018

Name: _____
Address: _____
City/State/Zip: _____
Phone: _____
Email: _____
Items to be sold: _____

**2018 VENDOR BOOTH FEE FOR THE 3 DAY EVENT ARE AS FOLLOWED:
EARLY BIRD SPECIAL NOW UNTIL FEBRUARY 14, 2018**

10'X10' SPACE - \$175.00
10'X15' SPACE - \$200.00
10'X20' SPACE - \$225.00
10'X30' SPACE - \$275.00

REGULAR PRICE STARTS FEBRUARY 15, 2018

10'X10' SPACE - \$200.00
10'X15' SPACE - \$225.00
10'X20' SPACE - \$250.00
10'X30' SPACE - \$275.00

ELECTRICAL & WATER HOOK-UPS ARE VERY LIMITED

Vendor set- up between 8AM & 12 PM- Festival Kicks off at 12 PM (March 16)

Festival hours: Friday, March 16 from 12 PM until 10:00 PM
Saturday, March 17 from 10AM until 8 PM
Sunday, March 18 from 8 AM until 5 PM - Safety Event (Optional)

For further information, please contact: Bob Cohn – 850-218-0711

Please make checks payable and mail to:

Smokin' in the Square BBQ Cook-Off
6730 Paso De Cortez Court
Navarre, Fl. 32566

Venue has moved to "Vince J. Whibbs SR. Community Maritime Park

(Rev. 12/21/2017)



Smokin' In The Square BBQ Cook-Off

Waiver of Liability

In consideration of your accepting my/our entry to the Smokin' in The Square BBQ Cook-Off Vendors, I, the undersigned, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the Knights of Columbus, Kansas City Barbeque Society, and/or assigns, for any and all injuries suffered by me and /or my team, family members, and/or representatives during, and/or in conjunction with, this event. I hereby grant full permission to Smokin' In The Square BBQ Cook-Off Competition and/or agents authorized by them, to use any photographs, videotapes, motion pictures, recordings and any other records of this event for any legitimate purpose.

Vendors Signature: _____ Date: _____

Vendor _____
(Printed Name of Authorized Signer)

Parent _____
(if Vendor is under 18 years of age) (Parent's Signature and Printed Name, if applicable)

Signing this application, you/your-organization agrees to abide by the Waiver of Liability of this application)