

P.O. Box 226 Norton, VA 24273 Friday JUNE 6, 2025

GENERAL VENDOR APPLICATION (Please Print or Type Application)

Name of Vendor:	
Mailing Address:	
City: State:	_ Zip: Phone:
E-Mail Address:	
Name of Contact Person:	Phone: (if Different from Above)
Size of Trailer or tent space needed for	or set-up: (Standard charge is for 10X10)
Electrical Requests:	
Description of items you wish to sell:	(We will have vendors on first come first serve basis)
FEE APPLICATION: \$20 (Standard Lo	t 10X10)
	DISCLAIMER
Festival Committee of the City of No hereby release the festival officials,	ot carried for voluntary participants of this event by the Best Friend rton. In consideration for my participation in the Best Friend Festival, I sponsors, the Wise County Chamber of Commerce, City of Norton and bility in the event of injury, damage, or other expenses incurred as a
Signature:	
Electronic Signature (if form	is returned via email)
By initialing	the above box you are signing the above release.

UNSIGNED DISCLAIMER WILL BE CONSIDERED UNREGISTERED FOR THE EVENT