



UnitedHealthcare NC MARATHON
BB&T Half Marathon
VENDOR APPLICATION

Race Date: Saturday, November 19, 2011
 Race Time: 8:00 am Marathon & Half Marathon Start Time
 8:30 am 5K Start Time
 9:00 am Food Vendors Open / Beer Garden Opens
 10:00 am – 2:00 pm Band / Food Available
 Place: Showplace and Transportation Terminal, downtown High Point
 Expected Audience: 2,000 Race Participants
 2,000 – 2,500 Guests & Spectators

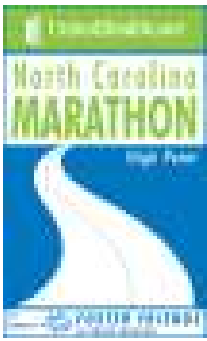
Must be read and understood.
Signature indicates acceptance and compliance.

1. Except by written consent of the UnitedHealthcare N.C. Marathon management, I cannot sublet or share my table space with an unauthorized person and/or company.
2. My display must occupy my assigned vendor space only and not encroach into the walkway of the stadium area or into other vendor areas.
3. I grant the rights to use photographs of the exhibit to the UnitedHealthcare N.C. Marathon for its own purposes.
4. I must staff my table continuously during stated hours.
5. The UnitedHealthcare N.C. Marathon management reserves the right to deny any vendor which it deems is not keeping with the theme of the race.
6. I, for myself and my company and representatives, agree to hold SHOWPLACE, UnitedHealthcare N.C. Marathon and their committee volunteers, staff, sponsors, and other vendors harmless from any claims from, or due to, the acts of myself, my agents and my employees, and / or for any loss and / or injury to people and / or property of any nature.
7. I, for myself and my company and representatives, assume all responsibility for loss, theft, or destruction of goods while participating in the UnitedHealthcare N.C. Marathon.
8. I understand that the materials and space provided consist of a 10 x 10' vendor space, one to three 8 foot table(s) that is covered and skirted, and two chairs. There is no space for piping, draping, back or side boards or curtains at this exhibit area.

My signature indicates I have read and accept the above stated vendor terms and conditions.

Signature *Date*

Print Name *Title*



UnitedHealthcare NC MARATHON and BB&T Half Marathon *VENDOR APPLICATION*

STEP #1

Company Name: _____ Contact: _____
Contact Title: _____ Email: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Cell: _____

STEP #2

Products to be sold at your table:

STEP #3- RACE DAY DETAILS

SET UP:

8:00 am - Saturday, November 19, 2011 - SHOWPLACE, High Point **OR** Friday, Nov 18th from 10-5pm

SERVICE:

9:00 am – 2:00 pm - Food Vendors Open to Guests, Spectators inside Showplace

ENDS:

3:00 pm – Race Ends – Clean Up – Depart Showplace

STEP #4 – EQUIPMENT PROVIDED

Showplace will provide the following supplies and equipment for each vendor.

- 2-4 Skirted Tables (depending on need)
- Chairs, Trash Can
- Electricity (if needed)

STEP #5: NCM PROMOTION OF FOOD VENDORS

To ensure that every food vendor has a great experience at the race, we will promote your services to the guests and spectators in the following manner:

- Signage inside and outside of Showplace
- Email promotion prior to race
- Call outs from the NC Marathon Emcee at the Start and Finish Line
- Promotion at Runner Registration & Packet Pick Up

STEP #6

Send Application to:

Foster Friends of North Carolina
PO Box 49605
Greensboro, NC 27419
Phone 336.834.9919 Fax 336.323.1366
lizwfu@aol.com

Payment:

Foster Friends of NC, race organizer, asks each vendor to make a donation of 10% of their proceeds to Foster Friends of NC (FFNC) EIN 65-1253675.

All Fees Are Tax Deductible
Foster Friends of North Carolina is a non profit, charitable organization that provides a brighter future to children experiencing foster care.
Tax ID# 65-1253675