

# FINAL INFO FORM 2009



Please fill out and email, mail or fax this form to our office:

Name: \_\_\_\_\_ Booth Number: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Cell Phone (on site): \_\_\_\_\_  
 Emergency Contact: \_\_\_\_\_ Emergency Contact Phone: \_\_\_\_\_  
 Vehicle Information: Make \_\_\_\_\_ Model \_\_\_\_\_ State \_\_\_\_\_ License # \_\_\_\_\_  
 Corrections to Information Needed: \_\_\_\_\_  
 Yes! I would like to be a Visiting Artist: \_\_\_\_\_

## 1. Lunch, Central Market - ALL LUNCHES \$8.00 inclusive of delivery and gratuity)

See [Menu](#)

Date	Central Market?	DESCRIPTION FROM MENU (see menu)	AMOUNT
Thursday			
Friday			
Saturday			
Sunday			

**TOTAL Lunches to GO (Includes delivery and gratuity)** \$ \_\_\_\_\_

## 2. Storage

PLEASE CHECK FOR AVAILABILITY!!! PERSONAL POD, 7' x 7' unit \$75: \$ \_\_\_\_\_

<b>TOTAL AMOUNT DUE FOR ALL ABOVE:</b>	\$ _____
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\_\_\_\_\_ Enclosed, please find my check, payable to MAIN ST Fort Worth Arts Festival

\_\_\_\_\_ \* Please charge my credit card, using the following information:

Card Type: \_\_\_\_\_ VISA or Mastercard  
 Card Number: \_\_\_\_\_ Exp Date: Mo \_\_\_\_\_ Year \_\_\_\_\_

Signature: \_\_\_\_\_

**PLEASE FAX DOCUMENT TO (817) 335-3113 OR MAIL TO THE ADDRESS BELOW. IF REMITTING BY CHECK, PLEASE INCLUDE A COPY OF THIS DOCUMENT WITH PAYMENT. PLEASE MAIL OR FAX NO LATER THAN APRIL 10, 2009.**

MAIN ST Fort Worth Arts Festival 777 Taylor St, Suite 100 Fort Worth TX 76102 [kari@dfwi.org](mailto:kari@dfwi.org) FAX: 817 335 3113