



**Parks & Recreation**  
CITY OF BENTON

**VENDOR BOOTH APPLICATION**

**EVENT INFORMATION**

- **Event:** 2023 Mistletoe Market
- **Date:** 12/02/23
- **Location:** Benton River Center  
1800 Citizens Drive, Benton Ar,72015
- **Booth Setup:** 9:00am **Booth Time:** 10:00am-3:00pm

**BOOTH INFORMATION**

- Booths Spaces are available on a first-come, first-served basis
- Payment of **\$10** is required to reserve your booth unless you have already paid for the Farmers Market
- 10' x 10' space, you provide maximum of 2 tables and chair with tent
- **Please provide a copy of your privilege license with your application**

**APPLICATION/PAYMENT REMITTANCE INFORMATION**

- Payment by cash, check, or card over the phone is due with your application (501.776.5970)
- Please make checks payable to: *City of Benton*
- **Please remit payment and completed application to:**  
City of Benton  
Attention: Matt Thibault  
114 S. East Street  
Benton, AR 72015

**VENDOR INFORMATION** *(All Information is Required for approval)*

Business Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City & Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Business or Privilege License #: \_\_\_\_\_

Email: \_\_\_\_\_

Provide a brief description of your Products/Services/Requests and Booth Plan:

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*If this event is cancelled due to weather, a full refund of booth fee will be made by the City of Benton. For questions, contact Matt Thibault [matt.thibault@bentonar.org](mailto:matt.thibault@bentonar.org) or 501-722-2052*

**Waiver:** *By submitting an application to this show, I acknowledge that property brought to this show is at my own risk and the city reserves the right to deny any products/services sold. I also acknowledge that setting up for this event, exhibiting at this event and removing my property at the end of the event, I am at risk of possible injury or loss of property. I assume the risk of loss or injury while at this event and agree to not hold the City of Benton, its officers, agents, sponsors or event organizers liable for any injuries or loss that I may suffer while participating in this event.*

Signature

Date

Payment/Application Received: \_\_\_\_\_

Booth Number: \_\_\_\_\_