



Wimberley Lions Club

P. O. Box 2367
Wimberley, TX 78676
www.shopmarketdays.com

2010 Market Days Booth Transfer Agreement (to be completed by new vendor)

Booth Space Number: _____ Please print all information

BUSINESS NAME _____

YOUR NAME _____ PHONE(_____) _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL _____

TEXAS SALES AND USE TAX PERMIT NUMBER _____

Copy of the permit must be attached

Transfer Fee of **\$25.00**, check or money order, must be attached to this AGREEMENT and returned as soon as possible to the Wimberley Lions Club at the above address. **POSTDATED CHECKS, OR PARTIAL PAYMENTS, CANNOT BE ACCEPTED.**

Obtain the gate/parking pass and security badge from the person transferring this booth space to you.

Check here () for an additional gate/parking pass and include additional \$30 fee

List up to 5 product categories you will sell in your booth, based on the list provided with this Agreement. This information is used in our Product Directory and for your listing on our Website.

I will sell the following products at Wimberley Market Days:

I acknowledge that I must comply with the terms of the Rental Agreement signed by previous booth owner and also the 2010 *Market Days Information and Rules* of the Wimberley Lions Market Days, for the use and rental of booth space. I fully understand that should I not comply with the Rental Agreement or 2010 *Market Days Information and Rules*, the Wimberley Lions Club, at its sole discretion, may cancel this agreement, with or without refund of the rental fee. I further agree that I will indemnify and hold the Wimberley Lions Club, and its members, free and harmless from any, and all, claims, demands or causes of action arising out of, or resulting from, the use of the booth space herein rented and sales incident thereto. **I FURTHER UNDERSTAND AND AGREE THAT I MAY NOT SUB-LET OR ASSIGN THE RENTAL AGREEMENT FOR THE BOOTH SPACE WITHOUT THE WRITTEN PERMISSION OF THE WIMBERLEY LIONS CLUB.**

Check Or M.O.# _____
WIMBERLEY LIONS CLUB

(Vendor Signature)

By: _____

Amount Paid _____ Date _____

Date: _____ # of passes req. _____