



RESERVATION FORM

ZONTA FALL CRAFT SHOW

FLOYD BENNETT MEMORIAL/WARREN COUNTY AIRPORT
443 QUEENSBURY AVE, QUEENSBURY, NY 12804
SEPTEMBER 20, 21 & 22, 2024

Please read the enclosed Information Sheet carefully. SAVE IT FOR FUTURE REFERENCE.
Type or print the information requested below, add date and sign your name.

Name: _____
Business Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: Home _____ Cell for Weekend Contact: _____
Email Address: _____
Type of Craft/Items sold: _____
Circle Selection \$ _____ enclosed for 3 days only 10' X 10' space:
1 space \$300 2 spaces \$450 3 spaces \$600

NEW YORK STATE SALES TAX ID NUMBER (REQUIRED): _____
CERTIFICATE OF AUTHORITY indicating "Registered with NYS sales tax Department" NEEDS TO BE CLEARLY DISPLAYED AT BOOTH FOR THE WEEKEND. Provide a copy with your reservation.

INSURANCE REQUIREMENT: Provide a copy of the CERTIFICATE OF INSURANCE listing liability limits of one million dollars (\$1,000,000) per occurrence.

- Information to be put on the Certificate of Insurance should read:
- Additional named Insured for Sept 20, 21, & 22, 2024, Zonta Club of Glens Falls volunteers, County of Warren, board, officers, employees, AND Adirondack Balloon Festival, Inc., shareholders, employees, agents, officers, directors, volunteers, consultants.
 - Zonta Club of Glens Falls, PO Box 251, Glens Falls, NY 12801

IF THIS IS NOT AVAILABLE, provide a copy of your homeowner's or rental certificate of insurance showing coverage for the time of the event, by dates. A signature on this information form releasing and indemnifying Zonta Club of Glens Falls, Warren County and Adirondack Balloon Festival from any liability will be necessary.

CANOPY: NO STAKES ON THE PAVEMENT. GRASS IS AVAILABLE FOR YOUR CANOPY. SUGGEST SETTING UP ON THE GRASS TO SECURE THEM, VERY WINDY AREA.

- I DO/DONOT (please cross out one) wish to leave the canopy set up overnight. I assume all risk associated with leaving the canopy set up overnight.

I have read these terms and I expressly release and indemnify the ZONTA CLUB OF GLENS FALLS, WARREN COUNTY, NY AND THE ADIRONDACK BALLOON FESTIVAL of any and all liability for any damage, injury, or loss to person, property or goods.

Date: _____ Signature: _____

* NOTE: GPS WILL BRING YOU IN A WRONG ROAD. See directions provided on the Information Sheet.
--- www.zontaclubofglensfalls.org ---