

November 10 & 11, 2023

Friday, November 10th Kickoff, Shopping, and Dining 5-8pm Saturday, November 11th Festival Festivities 9am to 7pm

HostOfChristmasPast.com

Dear Festival Event Participant:

The Festival Oversight Committee would like to take this opportunity to thank you for your Interest in Host of Christmas Past. Our local not for profit organizations are very important to our community and we are pleased you are part of the festival.

Please complete and return the enclosed application with fee to the FLC Chamber & Tourism office, 208 South Elk Avenue, Fayetteville, TN 37334 by 4pm, September 19th. The festival committee reserves the right to deny the application of any business group or organization. Any group failing to abide by the guidelines and attached application will be asked to close their event. *To aid in planning and promotion please let us know your intentions on participating.*

No signs will be provided by the festival however any organization who has participated in HCP in the past is welcome to have their existing sign to keep and use.

Questions can be directed to me at eventshcp@gmail.com or 931.993.8310. If your group is interested in participating but you need ideas for an event please call me or the Chamber & Tourism office 931.433.1234, and we will be happy to discuss this with you. The committee is working hard to ensure that the 31st Annual Host of Christmas Past is safe and enjoyable for everyone!

- Deadline: 4:00pm, September 19, 2023
- Event Fee \$75
- Make checks payable to Host of Christmas Past HCP
- Return to FLC Chamber & Tourism, 208 Elk Avenue South Fayetteville, TN 37334

Best regards,

Carol Foster, Event Committee

Host of Christmas Past Application for Event Participation November 11, 2023 By returning this completed form and fee you will be notified of updates that may become available.

Name of the <u>Local Non-Profit Organization</u> wh . Only a local not-for-profit organization, church, school g	no will benefit from the HCP event: group, etc. will be allowed to hold events or ben	efit in the festival.
	rson Preferred Mailing Address	
Email (print clearly)	Best number to reach you day or evening	
Name of Event: The following information is needed for promote Please give detailed description. Use back if n		
Will tickets be required or an admission charge	ed for event Yes No	Ticket /Admission Price: \$
Time of Event		
Specific location of event (If known; otherwise lo	ocation will be assigned.)	
 with festival's Christmas/Family Friendly them Festival hours on Saturday are 9am to 7pm; of are planning their activities around advertised Use of the trademarked HCP name & logo at name and logo to promote the event. The HCP Oversight Committee is not response. No groups will be allowed to set up on sidew Committee has the authority to ask any unaperby the City Police Department. This task is not Festival Area; from downtown, north to Monro Lincoln Avenue, is designated for the use of it ordinance, the HCP Oversight Committee has *NOTE: Fee is nonrefundable once you have been to change the scheduled events, through no fault of the festival committee reserves the right to deny to 	right to prohibit any written materials or other. Ince the hours for your event have been act times. It times. It times. Ince the any injury, damage or loss of items walks, street, or in parking spaces. With the proved vendors or groups that set up at the not enjoyable but must be done to be fair to estreet, south to Hwy 64 Bypass, east to the susinesses and for non-profit fundraising a sole authority to regulate the placement of approved to participate. Exception: If the of your own, or if your application is not ap the application of any business group or or an applicant that is not deemed appropriate.	therefore, all events must be approved and er items deemed inappropriate or not in keeping divertised, please remain open those hours. Visitors oversight Committee reserves the only rights to use the
By signing this application I along with members of my o Committee and agree to participate in the festival on the	e date and time indicated above.	he enclosed Guidelines set forth by the HCP Oversight
Signature of contact person responsible	<u>tor event</u> :	
Enclosed is my form and fee \$75* * Fees are nonrefundable upon approval. For question	ons call Event Chairman Carol Eoster 931.993	2.83/Л
, ,,		lle, TN 37334 Deadline to hold your space is needed
Committee Use Only: Date Received: Reason for denial:	Approved: Assigned Location:	Denied: Permit Number