

OCEAN ISLE BEACH SPRING MARKET

Saturday March 30 10:00A to 3:00P



5 West Third St. Ocean Isle Beach, NC

Applicant(s) Name(s)

NC Tax ID #(no app will be considered without a printed copy)

Tax ID# _____

of booth spaces desired _____

Additional Comments _____

Business Name (if applicable)

**\$60 fee with Apps due ASAP.
Limited space available. Payable to Pure Markets
(nonrefundable)**

Mailing Address

PURE MARKETS VENDOR ACKNOWLEDGEMENT

I, _____

City _____

Doing Business As (DBA) (if applicable)

State _____ **ZIP** _____

**have read and agree to abide by the
Rules&Guidelines of PURE MARKETS
In addition, I acknowledge the "Hold
Harmless Clause and Insurance" and
hereby and forever discharge PURE
MARKETS and OCEAN ISLE BEACH
of all manner of actions, suits
damages, claims and demands
whatsoever in law and equity, from
losses or damage to the signer's
property while in possession, super-
vision or auspices of PURE MARKETS.**

Phone Contacts _____

Email

Web Page www. _____

Description of Products to be sold

Print Name _____

Signature _____

Date _____

Email: puremarkets@gmail.com

**Mail: Pure Markets, PO Box 6241,
Ocean Isle Beach, NC 28469**