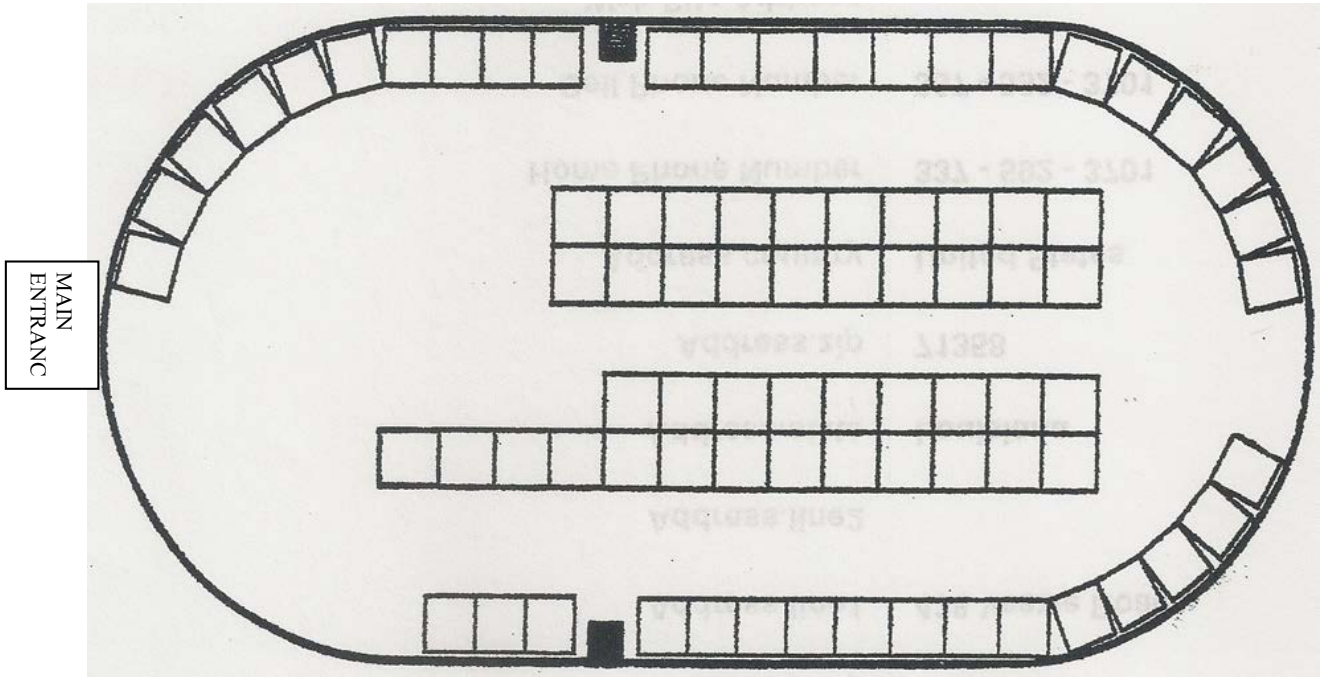


Number of booths requested _____ x \$ 125.00 = \$ _____
 Number of extra skirted tables _____ x \$ 15.00 = \$ _____
 Electricity \$ 20.00 = \$ _____
 Number of Vendor Badges Needed _____
 Name on check _____ Booth Name _____
 (make check payable to Festival des Fleurs)

RETURN COMPLETED APPLICATION WITH CHECK

Mail application to: UL Lafayette
 Attn: Billy Welsh
 P.O. Drawer 43702
 Lafayette, LA 70504

Please MARK/LABEL your 1st, 2nd and 3rd choice on the layout map below.



Name to Appear on Booth Sign _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____
 Email _____
 Signature _____ Date _____
 Printed Name _____

APPLICATION FOR OUTSIDE BOOTH SPACE

Number of booths requested _____ x \$ 75.00 = \$ _____

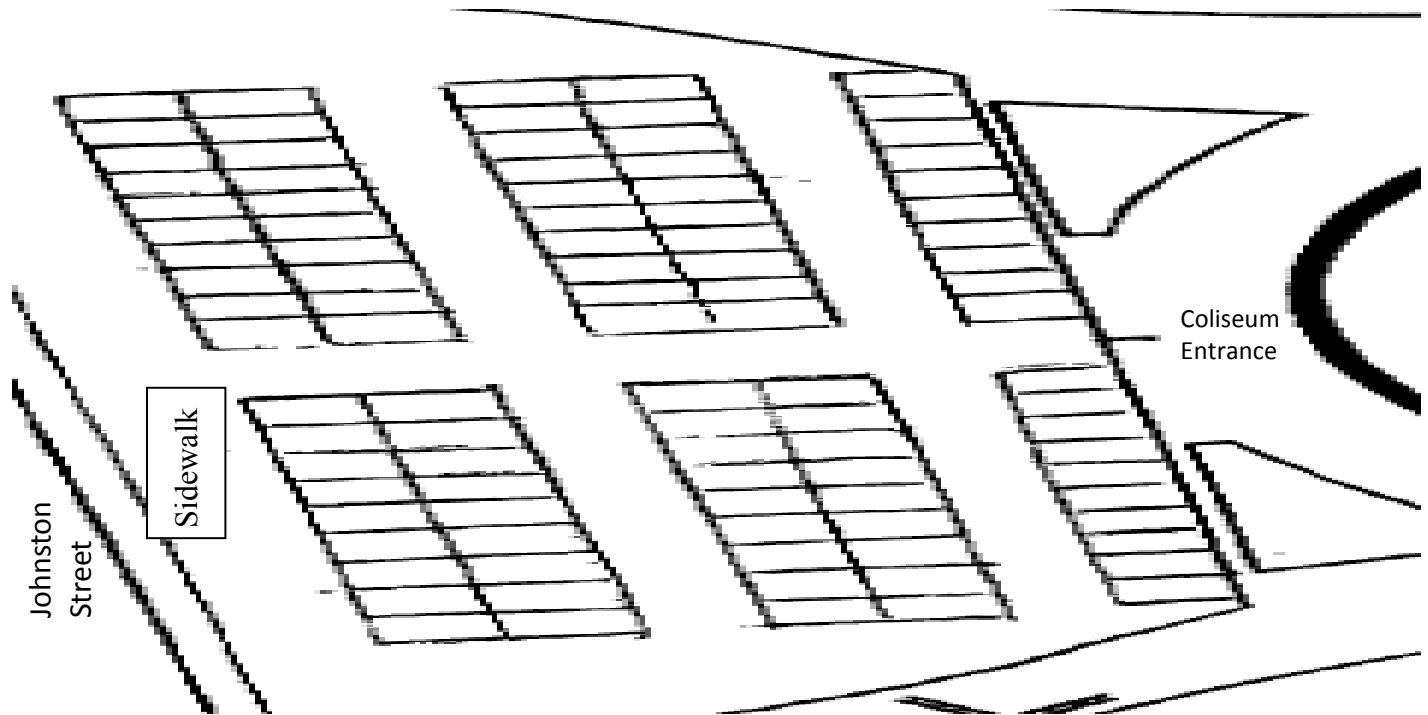
Number of Vendor Badges Needed _____

Name on check _____ Booth Name _____
(make check payable to Festival des Fleurs)

RETURN COMPLETED APPLICATION WITH CHECK

Mail application to: UL Lafayette
Attn: Billy Welsh
P.O. Drawer 43702
Lafayette, LA 70504

Please MARK / LABEL 1st, 2nd and 3rd choice on the layout map below.



Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Email _____

Signature _____ Date _____

Printed Name _____