

APPLICATION FOR OUTSIDE BOOTH SPACE

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

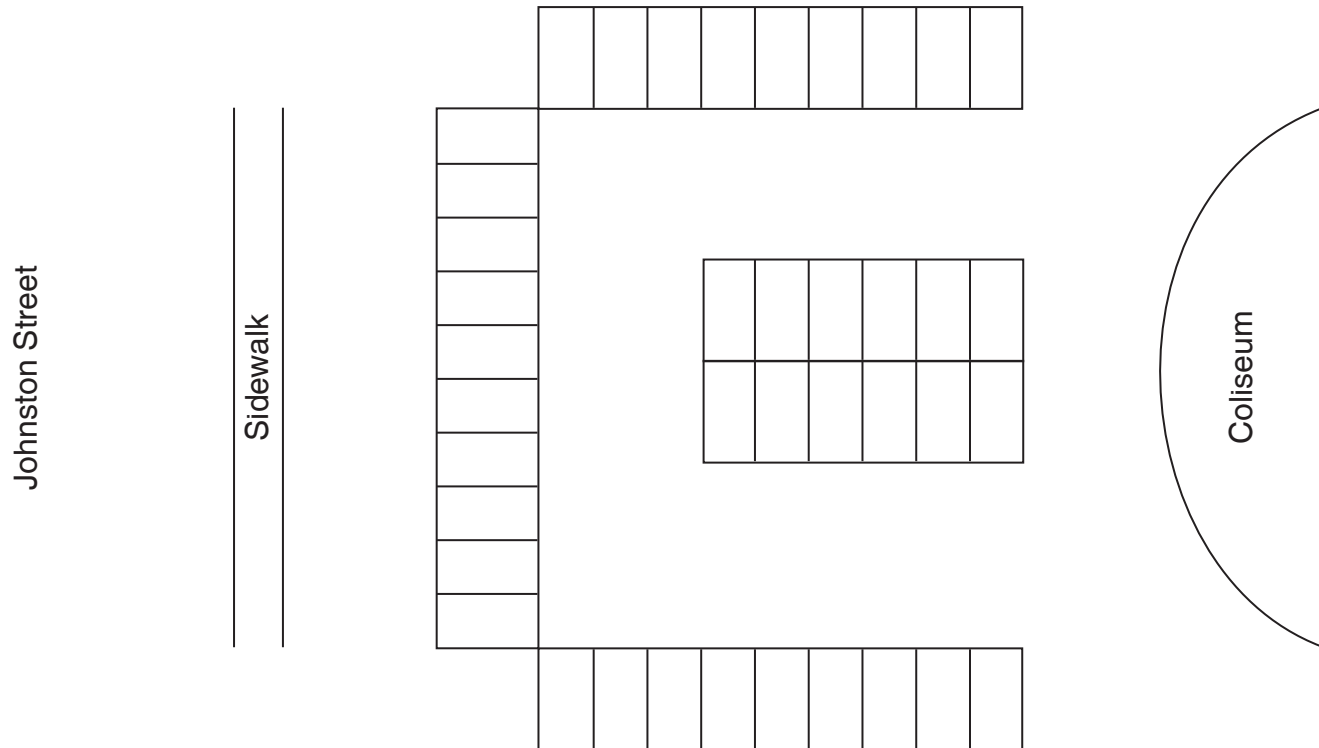
Number of Vendor Badges Needed _____

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. Box 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 _____