



Halfmoon

CELEBRATIONS

Association, Inc.

2 Halfmoon Town Plaza, Halfmoon, New York 12065

SPRING FLING SHOPPING BAZAAR

Saturday, April 25, 2026, from 10:00am – 3:00pm at the Halfmoon Town Hall

VENDOR REGISTRATION FORM

Contact Name: _____ Date: _____
(Please print)

Mailing Address: _____

City _____ State _____ Zip _____

Phone #: (____) _____ Email Address: _____

Information about your business:

Business Name: _____

Please describe your products/activities/service: **Please be specific in describing what you will be selling – failure to fully disclose or attempting to sell products not previously approved may result in you being asked to leave without a refund.**

By signing and payment or participating in this activity, I agree to the fullest extent permitted by law to indemnify, defend, and hold harmless the Town of Halfmoon and the Halfmoon Celebrations Association, Inc., (here after referred to as HCA, Inc) their employees, personnel, and volunteers from any claims arising out of acts or omissions and for any losses whatsoever and all liability for injuries or damages which may arise as a result of participating in this activity. You also agree that HCA, Inc. may use photographs of you and/or your display on social media to share our event activities with our followers. By submitting this application, you acknowledge and agree to ALL terms and fees required for participation in this event. Compliance with all requirements is expected, unless otherwise agreed to by HCA, Inc. Any non-compliance may result in the forfeiting of any fees paid and/or future participation being declined.

Cancellation Policy: Since the fees collected must offset the event expenses, **any requests for a refund must be submitted in writing by Friday, April 10, 2026.** Requests after that time will not be considered. There will be a \$5 service charge on all cancellations to cover refund costs and there will be a \$20.00 fee on all returned checks.

We require a donation for our raffle from your company/organization. The raffle helps support the activities of Halfmoon Celebrations Association, Inc., which is a not-for-profit organization that is run by town volunteers who have the commitment to deliver free family fun events, safety awareness and emergency preparedness programs to our residents that help to build a stronger, safer neighborly community.

You can opt out of providing a donation to our raffle by paying an additional vendor fee of \$20.00

Please have your donation to the raffle table on the day of the event by 9:30am

PARTICIPANT'S SIGNATURE: _____

DATE: _____

Only one Direct Selling Vendor will be allowed from each company. HCA, Inc. reserves the right to limit or deny any vendor application it deems inappropriate and limit vendors of the same type or category.

Registration fee options: (please choose one)

Option #1

_____Registration fee: \$50.00

Booth Space: 8' X 8' space (6' rectangular table and 2 chairs provided) **NO ADDITIONAL TABLES OR DISPLAY RACKS MAY BE SET- UP.**
If you set-up additional tables, you will be asked to take them down due to egress.

_____Electricity needed **\$5.00 ADDITIONAL FEE -LIMITED SPACES AVAILABLE**

Option #2

_____Registration fee: \$45.00

Booth Space: 8' X 8' space (NO TABLE provided, however 2 chairs provided) **YOUR TABLE MUST BE NO LARGER THAN 6' LONG. NO ADDITIONAL TABLES OR DISPLAY RACKS MAY BE SET- UP.**
If you set-up additional tables, you will be asked to take them down due to egress.

_____Electricity needed **\$5.00 ADDITIONAL FEE- LIMITED SPACES AVAILABLE**

If your display cannot fit within the guidelines above, consider a double space. Please note that there are limited double spaces available.

Please choose one option below:

_____ YES, I will be providing a raffle donation (minimum value \$20.00) the day of the event.

_____ NO, I do not wish to provide a raffle donation. I am including an additional \$20.00 with my vendor fee.

Total Enclosed \$ _____

****THERE WILL BE NO SOLICITATION BY VENDORS****

IF EVENT IS CANCELLED FOR ANY REASON BY HALFMOON CELEBRATIONS ASSOCIATION, INC, REFUNDS WILL BE ISSUED.

Please identify any special needs (i.e., Allergies or physical limitations): _____

Please complete the form and mail with a check or money order payable to:

**Halfmoon Celebrations Association, Inc.
Attn: Spring Fling Shopping Bazaar
2 Halfmoon Town Plaza
Halfmoon, New York 12065**

GPS Address to Town Plaza: 2 Halfmoon Town Plaza, Halfmoon, New York 12065

Vendors can begin arriving for set-up no earlier than 8:00am and no later than 9:30am.

For questions, please email Kristen Woodworth at HalfmoonCelebrations@gmail.com. **Please include Spring Fling Shopping Bazaar in the subject line. RSVP and checks MUST be received by Friday, April 3, 2026.**

Thank You,

Kristen Woodworth

Kristen Woodworth – Vice President & Volunteer

David Maxfield

David Maxfield, President & Volunteer