Mardi Gras Productions

225 Broadway, Suite 1202
New York, NY 10007
Tel: (212) 809-4900
Office Hours: Monday thru Friday, 9:30AM – 2:30PM

2017 Membership Application

SEND IN **BEFORE** MARCH 31ST AND PAY ONLY **$30.00**

*AFTER MARCH 31ST FEE IS **$55.00***

WE ACCEPT CASH, MONEY ORDER, VISA, MASTERCARD & DISCOVER CARD. **NO CHECKS!**

2017

Name: (First) _____ (Last) _____

Company / Store Name:_____

Address: _____ Apt. # _____

City: _____ State: _____ Zip: _____

E-Mail: _____@_____._____

Contact: (Home) _____ (Work) _____

(Fax) _____ (Other) _____ (Cell) _____

Description of item to be sold or service exhibited:
(Only **one** item per application. **Be specific.**)

_____

Existing Members, Enter last year's *Mardi Gras* membership card #_____

All events will take place rain or shine and no refunds or changes will be made for any reason.
All sales, cash or credit card are final.
M.G.F.P. may change dates and/or locations when it is so mandated by The City of New York.
I understand and agree with the *M.G.F.P.* "CREDIT CARD POLICY" that absolutely no refunds or credits will be issued at any time, for any reason.
I acknowledge that I am a member of *M.G.F.P.* Vendor organization and that participation at *M.G.F.P.* events is restricted to members only and not open to the general public.
I read and do accept and will abide by the *M.G.F.P.* Festival Policy (a copy is posted at the offices of *M.G.F.P.* or can be obtained by mail or fax upon request).

NON-FOOD VENDORS: PLEASE SUBMIT A COPY OF YOUR **NYS CERTIFICATE OF AUTHORITY (SALES TAX #)** & YOUR **TEMPORARY STREET FAIR VENDOR PERMIT ASAP.**

FOOD VENDORS: PLEASE SUBMIT A COPY OF YOUR **FOOD PROTECTION CERTIFICATE** & YOUR **TEMPORARY FOOD SERVICE ESTABLISHMENT PERMIT (TFSE) ASAP.**

Email: mardigras@nycstreetfairs.com or Fax: (212) 809-7345

SIGNATURE: _____

Credit Card #:_____ Exp. Date:_____

CVV #:_____Billing Zip Code:_____Billing Street #:_____

*A $5.00 CONVENIENCE FEE WILL BE ADDED TO ALL CREDIT CARD / DEBIT CARD SALES.