



Mardi Gras Productions

225 Broadway, Suite 1202
New York, NY 10007
Tel: (212) 809-4900

Office Hours: Monday thru Friday (9:30AM – 2:30PM)

2020 Membership Application

Membership FEE IS \$55.00

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

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

Name: (First) _____ (Last) _____

Company / Store Name: _____

Address: _____ Apt. # _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Cell Phone # _____ Other # _____

Description of the item you sell. (Only one item per application. **Be specific.**)

The 2020 Membership is only valid till 12-31-20

I authorize *Mardi Gras Productions*, to charge to my credit card/debit card provided herein.

I understand and agree that all events will take place rain or shine, and no refunds or changes will be made for any reason. I understand and agree all sales, cash or credit card are **FINAL**. *Mardi Gras Productions* may change dates and/or locations when it is mandated by The City of New York. I understand and agree with the *Mardi Gras Productions* "CREDIT CARD CANCELLATION POLICY" that absolutely no refunds or credits will be issued at any time, for any reason. I acknowledge that I am a member of *Mardi Gras Productions* vendor organization and that participation at *Mardi Gras Productions* events is restricted to members only and not open to the public. I read and do accept and will abide by the *Mardi Gras Productions* Festival Policy (a copy is posted at the offices of *Mardi Gras Productions* or can be obtained by email 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**

Cardholder Name: _____ Credit Card #: _____

CVV #: _____ Exp. Date: _____ Billing Zip Code: _____ Billing Street #: _____

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



Mardi Gras Productions

225 Broadway, Suite #1202
New York, N.Y. 10007
Phone: (212) 809-4900

Credit Card / Debit Card Authorization Form

PLEASE COMPLETE THIS AND RETURN TO US.
ALL INFORMATION WILL REMAIN CONFIDENTIAL.

Member ID#: _____

Cardholder Name: _____

Billing Address: _____

Card Number: _____

Expiration Date: _____ / _____ CVV Code: _____

Email Address: _____

I authorize *Mardi Gras Productions* to charge my credit card/debit card provided herein.
I understand and agree all events will take place rain or shine and **no refunds** or changes will be made for any reason.
I understand and agree **all sales are final**.
I will not dispute any charges with my credit card company.
If there is an issue with a charge, I will discuss it with *Mardi Gras Productions* to resolve it.
I understand that a dispute causes hours of time which costs money and agree to pay *Mardi Gras Productions* a fee of \$200.00 for any dispute made by Cardholder.
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 CANCELLATION 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 are 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).

Cardholder - Print Name, Sign and Date Below if you agree to the **No Refund** policy above.

Name of Cardholder: _____

Signature: _____

Date: _____

Once signed, email the completed form to:

Mardi Gras Productions
mardigras@nycstreetfairs.com