



BLACK SWAN MEADOWS

BRIMFIELD

sblackswan@gmail.com
(212)300-5999

_____		Number of Spaces
Name	Business Name	Cost Per Space \$
_____		Electric \$
Address		Parking \$
_____		Permit \$
City	State	Total \$
	Zip	50% Deposit \$
_____		Balance \$
Phone		Space Number _____

Web Address	Instagram	

Circle/Check MAY _____ JULY _____ SEPT _____ MA Tax ID Number _____

Estimate Arrival Date _____ . Notes _____

Exhibitor agrees not to hold back Black Swan Meadows LLC responsible for any personal injury or property loss.

Exhibitor agrees to abide by all rules and recommendations of the promoter including set up and departure times.

Exhibitor agrees to leave space clean and clear of trash.

Balance of contact must be paid before any set up or merchandise offloading begins.

NO PETS, strictly enforced.

No business transactions before opening day, Tuesday morning at 8:00am.

We reserve the right to ask any exhibition to leave who is showing disrespect for the property.

Fellow Dealers or the general public. Be nice.

I agree to all rules, terms and policies of Black Swan Meadows LLC _____
Attendee Signature

Check Payable to Black Swan Meadows

Mail Address
Black Swan Meadows
6043 E. Lafayette Blvd. Scottsdale AZ 85251