



HILL COUNTRY LIVING
 + RAINWATER REVIVAL
FESTIVAL

SATURDAY, OCT 20
10AM TO 5PM
 DRIPPING SPRINGS RANCH PARK
 RAINWATERREVIVAL.COM

VENDOR / EXHIBITOR / MARKETPLACE APPLICATION

Business name: _____

Contact name: _____

Mailing Address: _____
 Street/P.O. City State Zip

Business Phone: _____ Your cell phone: _____

Email: _____ Website: _____

Type of Products/Services*: _____

Load in time (please check one): Fri, Oct. 19 12pm-5pm Sat, Oct. 20 6am-8am
 Overnight security will be provided the night of Oct. 19, event host, venue and planners assume no responsibility for lost, stolen or damaged items.

Do you require a table and chairs? YES, please provide an 8 ft. table and two chairs. NO, I will provide my own.

Vendor Types	Early Bird (through July 31)	Standard (Aug 1 - Oct 15)	Booth Quantity	Electric Hookup*
Vendor Hall, 10X10 booth	<input type="checkbox"/> \$125	<input type="checkbox"/> \$175	_____	<input type="checkbox"/> \$35
Vendor Hall, 10X10 booth Government & nonprofit only	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	_____	<input type="checkbox"/> \$35
Large Display in Arena, 20X20 Must get approval from Sheila at (512) 263-9147	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225	_____	<input type="checkbox"/> \$35
Marketplace Booth, 10X6 Artisans, agriculture products, handmade goods only	<input type="checkbox"/> \$75	<input type="checkbox"/> \$125	_____	<input type="checkbox"/> \$35
Tiny Home	<input type="checkbox"/> \$125	<input type="checkbox"/> \$175	_____	<input type="checkbox"/> \$35
Tricked-Out Trailer	<input type="checkbox"/> \$125	<input type="checkbox"/> \$175	_____	<input type="checkbox"/> \$35

Booth number/s preferred (Please refer to floor plan and list top 3 choices. Assigned first come, first serve)
 1st choice: _____ 2nd: _____ 3rd: _____

***Electricity unavailable to booths # 19-52. If you require electricity, please list the following information:**
 Type of plug(s) _____
 # of items to power ____ **NOTE: If you require a plug other than a standard 110 volt, then please send a photo of your plug.**

Payment required with application.

Total enclosed \$ _____ (check or money order only) **OR** [Click to apply & pay online](#)

Make check or money order payable to: HCA-Rainwater Revival
Mail check and application to: 15315 Hwy 71 West, Bee Cave, TX 78738
For more information: Contact Sheila at 512-623-9147 or info@rainwaterrevival.com

Organizers reserve the right to refuse any vendor application if deemed inappropriate for event.