


PLEASE MARK YOUR CALENDARS AND JOIN US!



7TH ANNUAL
OZARK CITY SCHOOLS
WINTER WONDERLAND
HOLIDAY BAZAAR

COME SHOP 'TIL YOU DROP!

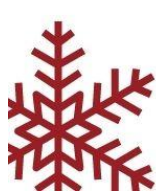

CLOTHES; JEWELRY;
CRAFTS; FOOD;
PERSONALIZATION;
ENTERTAINMENT;
FELLOWSHIP; FUN

ALL BOOTH PROCEEDS GO TO
OCS AT-RISK STUDENT SUPPORT

SAVE THE DATE

Friday, December 3rd
10:00AM-7:00PM
CHS PRACTICE GYM

PICTURES
WITH SANTA

  #ONEagle

VENDOR SPACE AVAILABLE
Contact Name:
Sharoresier Saulsberry
ssaulsberry@ozarkcityschools.net
334-774-5197 Ext: 6007 or 334-232-8446

VENDOR DETAILS

- Booth fee: **\$50** (if paid prior to November 19) or **\$55** (after November 19) for an approx. 8ft x 8ft indoor space (may purchase multiple spaces at 10% a discount on the additional space)
- No tables provided (chairs provided upon request); no extension cords will be provided.
- Set up may begin on Thursday from 12:00-5:00 PM or on Friday from 7 AM until doors open at 10 AM (Please do not leave valuable merchandise unattended).
- All vendors are asked to donate 1 item of your preference to the At-Risk Raffle Table
- All proceeds go to the OCS At-Risk Student Fund.
- Masks are strongly encouraged.



OCS Holiday Bazaar Booth Rental Agreement
 Carroll High School Practice Gymnasium
 Friday, December 3, 2021
 10:00AM-7:00PM



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VENDOR CONTRACT

Vendor name: _____ Contact number: _____

Vendor email: _____ Vendor Type: _____

Business Name: _____ Number of booths: 1 2 3 4
 (Circle answer)

I will need use of an outlet

I plan to set up on Thursday afternoon, Dec. 2nd at the following time: 12 1 2 3 4 5

I plan to set up on Friday morning, Dec. 3rd at the following times: 6 7 8 9

I will need chairs: 1 2 3 4 Other: ____

VENDOR PAYMENT & INFORMATION

Booth fee: **\$50** (if paid prior to November 19) or **\$55** (after November 19)

Please make checks payable to Ozark City Schools

Drop off or mail to Ozark City Schools Central Office 860 US-231, Ozark, AL 36360
 ATTN: Sharoresier Saulsberry

I understand that this payment is **non-refundable** and that I am responsible for any loss or damage to my items, as well as any injury that I or anyone working at my booth may incur at this venue. I understand that my booth space is not secured until my registration fee has been paid.

Authorized Signature: _____ Date: _____ PAID AMOUNT:\$_____

PLEASE COMPLETE AND RETURN THIS FORM