



**FESTIVAL ORGANIZER BUSINESS LICENSE**

Festival Organizer Name: \_\_\_\_\_

Festival Organizer Business Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Festival Organizer Business Telephone: \_\_\_\_\_ Local contact: \_\_\_\_\_

Regular Business License # \_\_\_\_\_ -or-  Non-profit Application on File with City

Festival Description: \_\_\_\_\_

Festival Dates: \_\_\_\_\_

Festival Location: \_\_\_\_\_

*As festival organizer, I understand and agree to comply with the rules and regulations detailed in Division 2, Festivals, of Article VII, in Chapter 6, Licenses and Business Regulations in the City of Cameron Code. Furthermore, I will provide any festival vendors with informational materials provided by the City of Cameron and will obtain acknowledgments from each festival vendor (without a City of Cameron business license) regarding their understanding of the sales tax responsibilities of vendors. Following the festival/event, I will return the festival vendor list and acknowledgments to the City of Cameron not later than seven (7) days from the end of the event.*

\_\_\_\_\_  
Festival Organizer signature Date

Festival Organizer Fee: **\$10.00** (Sec. 6-22)

Attached: Festival Vendor List (To be returned with applicable affidavits)

Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Zoning: \_\_\_\_\_ Inspections: \_\_\_\_\_  
Updated: 12/2021

**\*\*Provide festival vendor acknowledgment forms and MoDOR information.**

**FESTIVAL ORGANIZER: Festival Vendor List**

Festival Vendor Name: \_\_\_\_\_

Festival Vendor Address: \_\_\_\_\_

Festival Vendor Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Existing business license # \_\_\_\_\_ -or-  Acknowledgment of sales tax responsibilities

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Festival Vendor Name: \_\_\_\_\_

Festival Vendor Address: \_\_\_\_\_

Festival Vendor Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Existing business license # \_\_\_\_\_ -or-  Acknowledgment of sales tax responsibilities

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Festival Vendor Name: \_\_\_\_\_

Festival Vendor Address: \_\_\_\_\_

Festival Vendor Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Existing business license # \_\_\_\_\_ -or-  Acknowledgment of sales tax responsibilities

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