

ENTERAINMENT APPLICATION

RETURN TO: seattletraindayevent@usa.com

Business Name					- Data Bassiusd
Washington State UBI (Unified Business Identifier-REQUIRED)					Date Received (office use only)
City of Seattle Bus. License no	umber (refer to	Rules and Re	egulations - pg. 3)		_
Booth Name (for festival progr	ram)				
Contact Person					_
Business address					
CitySt	ate Zip	Marine market are successive	City	State	Zip
Phone: Day ()					
Fax ()		Email (requir	red)		
Business Name (on insurance					
Insurance Company & Policy Number					
nsurance phone and Contact					
Description of Entertainment to	be performed:				
Additional Requirement Reques	st:				
1 728					
			E		
			Email:		
Signature		Trucker 1	Date		