

For Office Use Only - Do Not Write In This Space

___ Food Concession / ___ Sat only / ___ Sun only / ___ Both days / ___ Selling /
 ___ Elec / ___ Water / ___ Lock / ___ #of bags of ice / ___ # of Coupons donated / ___ Paid Con Fee—Ck # _____ /
 ___ Fri. Potluck ___ Guest / ___ Sat. Vol Dinner ___ Guest ___ Paid for guest tickets / ___ Camping ___1 space ___2 space /
 ___ Agreement sent / ___ Agreement returned signed & accepted / ___ Special parking / ___ Weapon Course / Note: _____

**JULY 18-19, 2009 BANNACK DAYS APPLICATION FOR
 FOOD CONCESSIONS**

Please Print Clearly

NAME OF GROUP LEADER: _____
 NAME OF CONCESSION: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 TELEPHONE: (Wk / day) _____ (Home) _____ (evening) E-mail: _____

Please list all members that will be **Actively Participating** (Maximum of 10).

Age if	Yrs	Attending	Attending	Working	Camping
under	Vol	Fri Night	Sat Vol	both	with
18	at	Potluck?	Dinner?	Sat & Sun	Your
	Ban	Yes or No	Yes or No	or only one?	Group?

PRINT CLEARLY PLEASE!

Example: Jane Doe Age 14 vol 3 YES NO BOTH YES

- | | | | | | | |
|-----|-------|-------|-------|-------|-------|-------|
| 1. | _____ | _____ | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ | _____ | _____ |
| 5. | _____ | _____ | _____ | _____ | _____ | _____ |
| 6. | _____ | _____ | _____ | _____ | _____ | _____ |
| 7. | _____ | _____ | _____ | _____ | _____ | _____ |
| 8. | _____ | _____ | _____ | _____ | _____ | _____ |
| 9. | _____ | _____ | _____ | _____ | _____ | _____ |
| 10. | _____ | _____ | _____ | _____ | _____ | _____ |

Note: You may attach another piece of paper if more room is needed—but please list **ALL** information. (Need address with application of new people this year & Social Security # for Worker's Compensation coverage.)
(Group leaders are responsible for returning completed paperwork for each member, and distributing all information to members—(Including Sat Night Vol Dinner Information))

***All participants must dress in period cloths (women no Jeans or pants / men & women no Tank-Tops & no flip-flops—they are not period dress!)**

(SEE POLICY)

1. FOOD CONCESSIONS:

I / WE WOULD LIKE TO PROVIDE A FOOD CONCESSION AT BANNACK DAYS

A. Will food items be sold separately or only as a package?meal? _____

Must list Full Menu & Sale Price (Price can't be changed after signed contract) of each item selling: (They will be posted on our handouts)

A. **Food Concession Fee are nonrefundable:**

Early Bird Special \$25.00 + 40 or more ___ free food coupons if postmarked **by April 1st**.
\$50.00 + 40 or more ___ free food coupons if postmarked **after April 1st**

B. (Free food coupons are given to vol who do not receive any reimbursements and do not sell any items. — **see policy**) Please list what you plan to donate—it must be approved. (Food vendors must give all food (Example: Hamburger, Indian Taco, Pork Meal, Pork Sandwich, Meal may include drink but **not** drinks or snack only—it must be just like what you are selling)

D. Name and phone number of references (If new):

2. PLEASE COMPLETE:

A. Description of your booth/shelter: _____

B. Do you need electricity? (Limited availability in Bannack) YES ___ NO ___ Note _____

C. Do you need to be near water or have water available? YES ___ NO ___ Note _____

D. Do you need a lockable building? YES ___ NO ___ Note _____

E. Due to a disability will you or anyone in your group need accessible parking? YES ___ NO ___ Note _____

F. Will you need bags of ice? YES ___ NO ___ How Many _____
(About \$1.25 a bag—must pay for all you order even if you do not use them all) (Pay at Registration)

G. Will you be available on: ___ SAT 9am - 5pm / ___ SUN 9am – 4:30pm / _____ Other time:

H. What is your location preference: _____

I. What is your day/time preference for scheduled activities (**if doing a demos**): _____

J. Do you need camping at Bannack? YES ___ NO ___ (**Limit**: 2 camp spaces & 2 vehicles per group—10 people)
Names if not on front page _____

Check one: Need: 1Camp Space ___ / 2 Camp Spaces ___ / # Of people camping _____ (max 10 per group)

Type of camping ___ RV / ___ Pull Trailer / ___ 5th wheel / ___ Tent / _____ Other

K. Do you have any other questions? _____

3. NOTE : SATURDAY NIGHT VOLUNTEER DINNER (SEE POLICY)

*IF YOU PLAN TO ATTEND SAT VOL DINNER YOU **MUST BE PREREGISTERED ON THIS APP & APP MUST BE IN BY APRIL 1, 2009.** (**NO EXCEPTIONS**—THIS IS WHEN WE ORDER OUR FOOD) & **Please NO Maybes!** We want to be able to continue to offer this as a benefit.

DO YOU NEED **SAT VOL DINNER GUEST TICKETS** (ALL NON -VOL \$5.00) IF YES—HOW MANY? _____

NAME OF EACH GUEST (don't list workers on front page—only paying guest): _____

CHILDREN **5 & UNDER** ARE FREE, BUT MUST BE LISTED. CHILDS NAME & AGE: _____

PLEASE RETURN THIS APPLICATION BY April 1, 2009

TO: Bannack State Park /4200 Bannack Road / Dillon, MT 59725 / 406-834-3413