

SMOKE ON THE LAKE BBQ FESTIVAL AT LOGAN FARM PARK - ACWORTH Georgia Grown Members Only

eorgia Grown Members Only
May 8 & 9, 2026



Presented By: Superior Plura No.			
1. Name		GG#	
Address	City	State	Zip
Phone Number	E-mail:		
2. DESCRIBE & LIST ALL TYPES OF ITEMS YOU SELL:			
3. SET-UP IS FRIDAY AM ONLY			
4SINGLE (10'X10') \$75.00 - S	Space Only		
5. THIS EVENT IS JURIED - APPLI	CATION MUST BE	ACCOMPANIED E	BY FIVE (5) PHOTOGRAPHS.
FOUR OF YOUR PRODUCT, ONE OF	YOUR DISPLAY/S	SET-UP - TENTS /	ARE REQUIRED. YOU WILL BE
NOTIFIED OF ACCEPTANCE. WE WILL NOT PROCESS YOUR PAYMENT UNLESS YOU HAVE BEEN			
ACCEPTED. PHOTOS ARE <u>NOT REQUIRED</u> IF YOU HAVE PARTICIPATED IN A JRM SHOW BEFORE			
(List 2024/2025 show(s):)		
P.O. BOX 7	ER/SMOKE ON THE	LAKE BBQ FEST	ΓΙVAL
**SPOTS ARE LIMITED: IF YOU S			
YOU WILL BE REMOVED FROM OUR VENDOR LIST. NO REFUNDS OR SHOW TRANSFERS If you are interested in paying via credit card, fill-out the Credit Card Authorization (CCA) information below.			
Circle one: VISA	MASTER	RCARD	AMEX
Credit Card Number:		Billing Zip:	
Exp Date: 3 or 4-digit secu	rity code: A	Amt (booth + 3.5%):	
ecute the credit card authorization and on the date signed (below). I underst charge slip, that a photocopy or fax of (CCA) cannot be revoked.	and and consent to th	ne use of my credit	card without my signature on the
Cardholder's Signature:		Da	te:
<u> </u>			
Signing this contract will authorize JRM Managem accepted, you will not be charged and your applica ent weather or circumstances beyond our cont rules and regulations, which are part of this contractobb, JRM Management, Georgia Grown all org. SMOKE ON LAKE BBQ FESTIVAL, from any loss APPLICATION MUST BE SIGNED .	ntion will be returned. No or rol. I have read and fully un act. I herby agree to inde anizations and persons spans, claim, penalty or lawsuit	refunds will be given for inderstand all the details emnify and hold harmles bonsoring, managing or in any way arising from	or cancellation of the event due to inclem- as set forth and agree to abide by all exhibit as the City of Acworth, Rotary Club of North in any other way participating in the 2026 my operation or involvement in the festival.
-SIGNED: Office use only:		DATE	

DATE RECEIVED: _____ AMT: ____ RECEIPT #____ SPACE # ____