



ROCKY MOUNT
HUMAN RELATIONS
THE CENTER OF IT ALL

PLEASE RETURN BY FEBRUARY 7, 2020 TO:

Human Relations Department

331 South Franklin Street, Rocky Mount, NC 27804-1180

Office: (252) 972-1180 or Fax: (252) 972-1554 or Email: archie.jones@rockymountnc.gov

“2020 INTERNATIONAL FESTIVAL OF CULTURES” PARTICIPATION FORM

NAME _____ COUNTRY/CULTURE _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

TELEPHONE _____ FAX _____

E-MAIL ADDRESS _____

**I will participate in the following categories
at the International Festival of Cultures:
(Please complete all that applies to you)**

FOOD TASTING (Separate table required)

*Type/Name of food _____

Equipment needed (electrical outlet, number of tables and chairs, etc.)

EXHIBIT/DISPLAY

*Type of articles to be displayed (Please list)

Equipment needed (electrical outlets, no. of tables and chairs, etc.)

ENTERTAINMENT

*Type of entertainment (song, dance, step, mime, oral reading, music, etc.)

Equipment needed (microphone, podium, piano, etc.)

Preferred time for performance _____p.m.

FASHION SHOW

*Plan to Participate: Yes _____ No _____ *If Yes circle one (Children or Adults)

INTERNATIONAL BAZAAR

*Merchandise offered for sale (please list by category)

Equipment needed (electrical outlets, no. of tables and chairs, etc.)

Enclosed is my booth fee of _____\$25.00 _____\$50.00