

VENDOR APPLICATION

Lemoore Chamber of Commerce 16th Annual Central Valley Pizza Festival Lemoore City Park- 350 Bush Street April 15-17, 2016

(Friday 5-10pm, Saturday 10am-10pm, Sunday Noon-5pm)

Please Type or **Print Neatly**

TYPE OF VENDOR (check one)

FoodCommercia	lPolitical/Information	Non-Profit or Chamber	_Artisan/Crafts (100% ha	indmade by vendor)
NAME OF BUSINESS		CONTACT PERSON_		
MAILING ADDRESS		CITY	ST	ZIP
WK PH	FAX	CELL _		
E-MAIL				-
Non-Profit IRS #		Health Dept. P	ermit #	
City of Lemoore Busin	ess License			
How many years have	you been in the vendor busin	ness?		
information is comple Equipment Description Amps Please note that 220V appliance, light or pied 2 outlets. Limited eled	te and absolutely correct (con Watts WILL NOT be available. Only te of equipment must be on intricity available. If additional dunless they are "whisper questions"	110 Volt power is available ts own outlet. Vendors payi electricity is needed, vendor	of paper if needed) e. If using event-supplied for electricity will be	ed electricity, each

<u>VENDING DOCUMENTATION:</u> Please attach a word document with all food and drink items to be sold, including prices to be sold or displayed at your booth. Use a separate page. ATTACH PHOTO OF BOOTH displaying menu with price list.
<u>YOU WILL NOT BE CONSIDERED WITHOUT THIS INFORMATION</u>. Only listed items can be sold or displayed. Violations will result in cancellation of vendor contract and forfeiture of vending space and all fees. Vendors do not have exclusivity on any one product type. Selection of vendors is at the discretion of the Lemoore Chamber of Commerce (LCOC) based on the vendor's ability to enhance the overall event image. LCOC reserves the right to refuse or reassign space at any time. No weapons of any kind sold during event.

<u>INSURANCE:</u> ALL FOOD & RIDES/INFLATABLE VENDORS are required to submit a certificate of \$1 million general liability insurance naming the "Lemoore Chamber of Commerce, and the City of Lemoore, 300 E St. Lemoore, CA 93245" as additionally insured.

BOOTH SIZE & EVENT FEES: All Booth sizes are 15x15 feet. Vendors occupying more than 15x15 foot space must reserve two spaces. **Absolutely NO sharing of booth space with other vendors**.

FEES

Food	\$350
Commercial	\$300
Chamber Members & Non-Profit Org.	\$100
Chamber Members with Ad in Pizza Press	\$0
Political/Information ONLY	\$100

Artisan/Craft \$150 (100% handmade by vendor)

+

Electricity \$25
Late Fee (if postmarked after April 3) \$25

TOTAL FEES \$

ALL FEES ARE TO BE PAID TO THE LEMOORE CHAMBER OF COMMERCE. Please remit CASHIERS CHECK or MONEY ORDER to "Lemoore Chamber of Commerce 300 E St. Lemoore, CA 93245" with completed forms & photos, no personal checks unless you are a current Chamber Member.

EVENT REGULATIONS

(Please initial each of the following as your acknowledgment of each regulation)

This is a Three Day Event – Your fee covers all 3 days and we encourage vendors to be present all 3 days. You will
not receive a discounted price if you do not attend all 3 days. The event will occur rain or shine, fees will not be
refunded due to inclement weather or Acts of God.
Vendors will be allowed to set up between 2pm-5pm Friday, 7am-9am Saturday and by Noon on Sunday. All
vehicles must be removed from the area within 30 minutes prior to event start time. ABSOLUTELY NO
VEHILCES ALLOWED ON THE CITY PARK GROUNDS.
All vendors must be fully operational at the start time of the event and operate the entire duration of the event.
No early breakdown allowed. No late set-up will be allowed once the event has begun.
Absolutely no alcoholic beverages are allowed outside of the designated beer garden area.
Solicitation of sales, funds, signatures, etc. must be confined to your booth space.
Vendors are responsible for providing canopies, tables, chairs and all other necessary equipment. Vendors must
supply trash cans for garbage inside their booth space. Excess garbage must be placed inside the event
dumpsters at the end of the day. Space must be left clean and free of all trash at the end of the event.
All food handlers must comply with and meet the Kings County Health Department requirements and have their
Kings County Food Handlers Certificate posted inside their booth space.
In the event that a vendor for any reason does not comply with the regulations of this event, the event staff reserves the right to immediately close down that vendor – no refund will be granted.
Food vendors using grills or open flames must have the proper fire extinguisher available at their space and prope
waste cans.
PAPERWORK CHECK-LIST
THIS Application
Money Order or Cashiers Check for Fees
Copy of Health Department Permit
Certificate of Liability Insurance

Word document explaining all vending itemsPhoto of Booth listing items and prices		
By signing this Vendor Application and Agreement, yo is the sole responsibility of the Lemoore Chamber of Cenforceable. The undersigned has read the event regulation agrees to adhere/abide by them. I realize if I, m regulations, I will automatically forfeit my vending spareceive a refund of fees. The undersigned also certifie 2) accept legal process on behalf of the group. The unapplication is correct, and agrees to indemnify and ho liabilities, cost and expenditures, including attorney's use of the Lemoore City Park property during the ever	commerce (LCOC) and all decisions of the clations which are hereby part of this control y company, or one of my workers or control, the opportunity to sell products/servings that he/she is authorized 1) to execute a dersigned acknowledges that all informated harmless LCOC and the City of Lemoore fees and costs of defense, which may arise	LCOC shall be final and cract and by signature cractors violate any of the ces, and that I will not on behalf of the group and ion submitted in this e from all damages,
Signature (Owner or Agent)	Print Name	Date
Approved by Chamber	Date	2046
For more information Lemoore Cha Email: events@lemoorech	about the Central Valley Pizza Festival amber Office: 559-924-6401 amber.org or ceo@lemoorechamber.org	
If you wish to pay rees by visa of Mastercard.		
Print Name as it appears on card	Credit Card #	
/_ Expiration Date	Three or Four digit Se (usually located on bannext to signature)	-
Card Holder Signature		