

Downtown Escondido Chocolate Festival
VENDOR APPLICATION

Date of Application: _____
Business Name: _____
Contact Person: _____ **Phone Number:** _____
Address: _____

Email: _____
Sellers Permit #: _____
Business License # (if in Escondido): _____
Description of items to be sold (please include ALL items to be sold): _____

Vendor Rates:
15x10 Booth **\$50**
Expanded Booth add **\$25**
Electricity add **\$25**

Make Checks Payable to:
Downtown Business Association of Escondido

Or Pay by Credit Card:

TOTAL DUE: _____

Visa/MC/Discover #: _____
Name on Card: _____
3-Digit Security 3: _____
Exp. Date: _____
Billing Zip Code: _____

*Vendors are responsible for providing tables, chairs, canopies and all other booth display supplies. Electricity is available for an extra charge, please see above rates. As a condition of applying for booth space at this event, vendor understands that they are required to be fully set up from 12:30pm-5:00pm

APPLICATION DEADLINE: Monday, January 18, 2010

BOOTH SPACE INFORMATION: 15ft.x10ft unless purchasing expanded booth.

HEALTH DEPARTMENT REQUIREMENTS: Vendors are responsible for knowing and meeting all Health Department regulations. Be prepared for unexpected visits from the Health Department. Before application is fully processed, vendor must provide proof of payment for single-event permit, copy of multi-event permit, or applicable permit number for operating a temporary food facility; suitable for type of food being sold or sampled. Permit must be posted and visible in booth.

CONFIRMATIONS AND REFUNDS: Confirmations will be made via email. No refunds will be permitted after confirmations have been sent. There are no refunds in the case of inclement weather, acts of nature, or restrictions by government agencies to cancel the event, over which the producers have no control.

PLEASE READ COMPLETELY AND SIGN BELOW: With my signature I agree to waive, release, indemnify and hold harmless the Downtown Business Association of Escondido from any and all liability, claims, and causes of action, including attorney's fees and court costs, for injuries or damages to person or property arising out of my participation in this event except injury or damages deliberately or willfully caused. I also understand that this waiver cannot be modified or changed. I certify that all information submitted in this application is accurate to the best of my knowledge.

Signature

Date

RETURN APPLICATION TO: Downtown Business Association of Escondido, 120 W. Grand Ave., #202, Escondido, CA 92025 or via FAX: (760) 745-0307

Please contact Events Manager, Jenessa Schaniel, (760) 745-8877 or jschaniel@downtownescondido.com with any questions.