

Sherwood Robin Hood Festival Food Vendor Application ~ July 19-20, 2019

Company Name:	
Contact Person:	
Phone Number:	
E-Mail Address:	
Mailing Address:	
Location preference (e.g., same as last year)?	
Are you a first timer?	
Please attach your menu and enter here the three items you would like protected:	
Booth Space Fee for Food Vendors is \$275 for the first space (\$175 for non-profits), for an 11' wide, 15' deep space. Additional spaces are \$200 (\$90 for non-profits); half spaces are \$100 (\$45 for non-profits). All trailers need to be measured from the tongue tip to back of trailer with doors (or awnings) open to determine space needed.	
Number of full spaces	
Number of extra spaces	
Total number of spaces	
Total price of space(s)	
Clean up Deposit	\$50
Total (Due with Application). One check please, thank you!	\$

Please send Vendor Application to SRHFA, P.O. Box 496, Sherwood OR 97140
Make checks payable to Sherwood Robin Hood Festival Association.

1. Signed and completed Vendor Application
2. Your check to cover your booth space
3. If necessary, a Certificate of Insurance with the following criteria:

* Coverage Requirements:

* General Liability: \$1,000,000 Per Occurrence/\$2,000,000 General Aggregate

* Additional Insured Verbiage (see below)

* Waiver of Subrogation in favor of Sherwood Robin Hood Festival Association and US Bank National Association

* Hold Harmless

* Primary and Non-Contributory Wording

Remember: No food vendor application can be approved until the insurance is received by the Festival.

*If you have questions, please contact John Tucker, Vendor Chair, at pdog_man@yahoo.com.

I HEREBY AGREE THAT I AM AN INDEPENDENT VENDOR AND WILL NOT BE AN EMPLOYEE OR AGENT OF THE SHERWOOD ROBIN HOOD FESTIVAL ASSOCIATION, OR THE CITY OF SHERWOOD DURING THE PERFORMANCE OF THIS AGREEMENT. THE SHERWOOD ROBIN HOOD FESTIVAL ASSOCIATION AND THEIR AGENTS AND ASSIGNS ASSUME NO RESPONSIBILITY OR LIABILITY FOR ANY INJURY, DAMAGE OR LIABILITY TO PERSONS OR PROPERTY SUSTAINED BY REASON OF PRESENCE AT THE SHERWOOD ROBIN HOOD FESTIVAL.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE COVENANTS OF THE FESTIVAL AND THAT I AM ELIGIBLE TO PARTICIPATE. I FURTHER UNDERSTAND THAT VIOLATION OF THESE COVENANTS WILL RESULT IN THE FORFEITURE OF MY FEES AND THE RIGHTS TO PARTICIPATE IN THIS AND FUTURE SHERWOOD ROBIN HOOD FESTIVALS.

Vendor's Signature: _____

Date: _____

For official use only: Check Number _____ Amount _____ Date _____