



Vacaville Fiesta Days 2024 Non-Food Vendor Application

Event Information

When: Saturday, May 25 - Sunday, May 26, 2024

Where: Andrews Park, 718 W Monte Vista Ave, Vacaville, CA 95688

What: Music, Entertainment, Family Fun, Food, Drinks

Vendor Packet Checklist

____ Completed application form (all questions must be answered, on file & application signed)

Vendor Terms & Instructions

Applications: Applications can be submitted by mail to Vacaville Fiesta Days, PO Box 5263, Vacaville, CA 95686. This application is neither an offer nor a guarantee of space. No exclusivity will be given for this event. Incomplete applications will **NOT** be considered OR returned. All questions must be answered completely and accurately – the information you give is the sole representation of your business for the selection process.

Approval: If approval is issued, the Events Chair will select the vendor space; special requests considered but not guaranteed. Fiesta Days is seeking experienced operators with quality presentation; consideration will be given to those with unique items.

Payments: Payment is due with this application. You will be contacted at the time of approval. Payments may be made in the form of cash, check, or credit card. Contact Fiesta Days at 707-628-5494 if assistance is needed in making a payment.

Space: The fee is only for the rental of the space. **You must provide your own canopy, table, chairs, lights and power cords.**

Option 1 \$100 - 10 x 10 booth space for each day.

Vendor Hours: Vendors load-in - vehicle load in on School St. between 9-11 or 4-7 pm on Friday, **May 24, 2024**. Tear down may begin no earlier than close of event on May 26, 2024. Vendor parking will be available, but not guaranteed, at the Georgie Duke Center and is accessible from Monte Vista & School streets.

Refunds: This is a rain or shine event; no refunds will be given for inclement weather or no shows.

Restrictions: The following items are prohibited on the premises and may not be sold at this event: weapons, drug-related paraphernalia, nor items and/or activities for which an adult-oriented business permit would be required (per Chapter 9.05 of the Vacaville Municipal Code).

COVID-19: Cal/OSHA's regulations, title 8 section 3205 and others, require employers to protect workers exposed to COVID-19. All vendors must adhere to safe workplace practices while participating in any event in the City of Vacaville. https://www.dir.ca.gov/dosh/dosh_publications/COVID19-Trifold-GeneralIndustry.pdf

If you have any questions regarding this application, please contact the Vacaville Fiesta Days Office. Please submit applications by mail to:

Submit applications and fees to:
Vacaville Fiesta Days
PO Box 5263, Vacaville CA 95686

Application Deadlines:
Sunday, April 14, 2024



Vacaville Fiesta Days 2024

NON-FOOD VENDOR SPACE APPLICATION

EVENT, DATES, TIMES, LOCATIONS & FEE SCHEDULE:
Saturday, May 25 - Sunday, May 26, 2024

CHECK ONE: New Returning

OPTIONS Option 1 (10 x 10 \$100)

Quantity Needed: _____

CHECK REQUIREMENTS (Must include photo of exhibit.)

*****Vendors must provide a pop-up tent, table, chairs, lights and Commercial Grade power cords up to 100'*****

BUSINESS INFORMATION

Business Name _____

Name of Applicant _____ Owner? D Yes D No

On-site Contact _____ On-site Contacts Cell # _____

Address _____

City _____ (_____) State _____ Zip _____

Business Phone (_____) _____ Residence Phone (_____) _____

Cellular Phone (_____) _____

E-mail address _____ Web Site _____

*Federal Taxpayer's ID # _____ *CA Seller's Permit# _____

*Business License # _____ *Attach copies to application

How long in business _____ Sole Proprietor Partnership Corporation Other _____

Have you ever conducted business with the City of Vacaville? Yes No

If yes, what year(s)? _____ Company _____

INSURANCE REQUIREMENTS

Proof of Insurance is required with your contract. (see insurance offer on our website if needed)

Each exhibitor must provide proof of insurance.

Please have your Insurance carrier/agent provide the Fiesta Days Committee with these two (2) required forms. 1. **Certificate of liability Insurance** 2. **Additional Insured Endorsement Form CG 20 26.**

The forms can be sent one of two ways: 1. Mail to: PO Box 5263, Vacaville, Ca 95686 2. By email to: Fiestadays@yahoo.com. The Certificate of Insurance must show proof of Commercial General liability Coverage with the following limits: **\$1,000,000 Per Occurrence, \$2,000,000 Aggregate.**

Concessionaires offering products for sale are required to also show proof of "Products/Completed Operations" Coverage as part of their commercial General liability policy with the same limits listed above. In addition, Vacaville Fiesta Days/Committee, PO Box 5263, Vacaville CA 95686 and the City of Vacaville, 650 Merchant St, Vacaville CA 95688, must be named, by endorsement to the policy as "additional insureds" with respects to your organization's or business's activity during the festival. If you or your insurance company has questions regarding the requirements listed in this letter, please contact Risk Management at City of Vacaville at (707) 449-5101.

My own carrier Carrier _____ Policy Expires _____

Application Deadlines: Sunday, April 14, 2024

REFERENCES

List 2 fairs, festivals or shows you have recently participated in:

Event#1 _____

Contact person _____ Phone () ----- Event#2 _____

_____ Contact person _____

Phone (_____) _____

PRODUCTS & SERVICES PRICING (complete or attach separate list)

TYPE OF ITEM (Example: Baskets, Music, Clothing, etc.)	PRICING (Range by type)

List additional items on separate page

No entry will be considered for acceptance unless accompanied by all required forms, fees, proof of insurance (follow directions of insurance request), Police forms completed with ID cards, Driver's License and (for new vendors) photo of booths (copies sent in must be clear).

By my signature below, I commit to participate in this year's Vacaville Fiesta Days. I further acknowledge & certify that I have correctly filled out the vendor application and read ALL Vacaville Fiesta Day guidelines & herby agree to abide by them.

Applicant Signature: _____ **Date:** _____

For additional information, visit us online at: www.fiestadays.org.

CERTIFICATION OF APPLICANT I, the undersigned, acknowledge, agree and understand that: **Participation** may involve risk of serious injury, including but not limited to bodily injury, death, property damage and economic losses, which may result not only from the participant's actions, inaction's, or negligence, but also from the actions, inaction's or negligence of others, or the conditions of facilities, equipment, or areas where the event or activity is being conducted. Furthermore, the undersigned both understands the risks associated and agrees to assume any and all such risks arising out of or in the course of participation in this activity or event. The undersigned warrants that he/she is in good health and has no physical condition, which would prevent safe participation in this activity or event. Furthermore, the undersigned participant agrees to immediately report to the activity or event supervisor any unsafe condition and/or any injury incurred. The undersigned agrees to indemnify, defend, and hold harmless the Vacaville Fiesta Days, its officers, officials, employees and volunteers from and against all liability, loss, damage, expenses, costs (including without limitation costs and fees of litigation) of every nature arising out of or in connection with the participation in the activity or event described above or failure to comply with any obligations related to this activity or event. The undersigned shall procure and maintain insurance as set forth in Exhibit "A" hereto. The undersigned participant hereby give consent to be treated by a physician or surgeon in case of sudden illness or injury while participating in the above activity or event. It is understood that the Vacaville Fiesta Days provides no medical insurance for such treatment and that any such cost thereof will be at the undersigned's expense. I have read and understand the instructions and any additional information attached. I understand that this form is an application for space only, and is not an offer by the Vacaville Fiesta Days to rent space. I certify that all information contained in this application to be true and accurate to the best of my knowledge.

Signature _____ **Date** _____

Printed Name _____

Vacaville Fiesta Days

E-mail: fiestadays@yahoo.com

Phone:

(707) 628-5494 (707) 592-1525

PO BOX 5263, Vacaville, CA 95686

Application Deadline:

Sunday April 14, 2024