

# Riverside Trek Fest Vendor Application

<b>ORGANIZATION NAME:</b>	
<b>CONTACT PERSON:</b>	
<b>MAILING ADDRESS:</b>	
<b>CITY, STATE, ZIP:</b>	
<b>PHONE NUMBER:</b>	
<b>EMAIL:</b>	

## **PRODUCTS OR SERVICE:**

Type of items (food, beverage, or other) that your organization would like to sell:

How many people do you plan to serve? \_\_\_\_\_

Please list Food and Beverage items you intend to vend:

Please describe how you intend to prepare your food (Grill, Oven warmers, etc.):

Dimensions of vendor booth will be 10x10 feet. Fee for vending is \$125.00 (second site \$75.00)  
How many sites do you need? \_\_\_\_\_

Please list all hazardous materials that will be at your site (gasoline, propane, cleaning materials, etc.):

Shelters and canopies with weights, stakes and tie downs, table coverings, chairs, equipment and signage are the sole responsibility of the vendor.

Will you need electricity? \_\_\_\_\_ NO \_\_\_\_\_ YES

Electricity ( Standard 120 volt outlet ) is available for each vendor.

All food vendors must meet health codes for Washington County Board of Health.

Questions please contact Washington county Board of Health

Telephone: (319) 653-7782

Fax: (319) 653-7780

• E-mail: [environmental@co.washington.ia.us](mailto:environmental@co.washington.ia.us)

## **RULES AND REQUIREMENTS:**

Set up time starts Friday 8 am.

Event time is 4 pm. To 11 pm. Friday Night

Vendors are expected to serve until at least sundown.

All vehicles must be unloaded and off event grounds by 11 am. **NO EXCEPTIONS.**

Alcoholic beverages are not aloud outside the designated areas.

**All items presented and displays must be suitable for family audience.**

Vendors are responsible for obtaining a temporary license for this event from the Washington County Health Department. You may contact their office at (319) 653-7782

**IN ORDER TO BE CONSIDERED, ALL APPLICATIONS ARE DUE NO LATER THAN JUNE 10<sup>th</sup> WITH ALL PAPERWORK FEES AND DEPOSITS.**

Your application cannot be processed unless this form is completely filled out, the vendor fees are enclosed, and copy of your proof of liability coverage is inclosed.

Vendor fees may be mailed to Riverside Area Community Club, PO Box 55, Riverside, Iowa 52327  
Make checks payable to ( Riverside Area Community Club Trek Fest 2014 )

Signed: \_\_\_\_\_ Date: \_\_\_\_\_