

## VENDOR APPLICATION

**NAME OF CONTACT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**ORGANIZATION NAME (if applicable)** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_ **E-MAIL ADDRESS:** \_\_\_\_\_

**WHAT PRODUCTS WILL YOU SELL (please list all the items that you will sell)**

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**SPECIFIC NEEDS:**

ELECTRICAL HOOK-UP     OTHER NEEDS (please specify) \_\_\_\_\_

**IF YOU ARE SELLING FOOD ITEMS PLEASE COMPLETE THE FOLLOWING SECTION:**

1. I have a temporary restaurant license \_\_\_\_\_ (initial)
2. I am aware of food sanitation rules and agree to comply with these rules \_\_\_\_\_ (initial)
3. I assure that at least one person working in the booth will have a food handlers license \_\_\_\_\_ (initial)

### VENDOR FEES ARE \$100 PER BOOTH SPACE

**MAIL COMPLETED APPLICATION AND VENDOR REGISTRATION FEE TO:**

MULTICULTURAL FAIR  
PO BOX 67  
MEDFORD, OR 97501

**APPLICATIONS MUST BE RECEIVED BY FRIDAY, AUGUST 24<sup>th</sup>, 2007**

**QUESTIONS: CALL 774-2544, EXT. 3901**

**MULTICULTURAL FAIR PARTICIPATION AGREEMENT:**

Please read and sign below:

1. Participants will provide their own equipment and will set up between 6:30 A.M.-8:30 A.M. Saturday, September 29<sup>th</sup>, 2007.
2. Participants must breakdown and remove all equipment by 7:00 P.M. Saturday, September 29<sup>th</sup>, 2007.
3. Participants must provide their own extension cords.
4. Participants agree to comply with all Jackson County Health Department standards, rules, and regulations. The Friends of the Fair will not be liable for any non-compliance of these rules and regulations.
5. Alcohol or drugs are not allowed on Multicultural Fair premises.
6. All applications will be reviewed by the Friends of the Multicultural Fair to determine if the application meets the theme and mission of the event. The Friends of the Multicultural Fair reserve the right to deny participation to any application that does not fit the mission or theme of the event.

*The undersigned voluntarily chooses to participate in the Multicultural Fair. The undersigned therefore knowingly, freely, and voluntarily assumes all risk of injury and waives any claim, right, cause of action or demand for loss, damage, destruction or injury of any kind whatsoever, including but not limited to: cost, loss of service, expense and/or compensation know or unknown, now or in the future, arising out of the undersigned's participation in the above-referenced activities, against the City of Medford, the Friends of the Fair Committee, and all the officers, employees, agents, and assigns thereof, respectively. Return of this application shall be deemed acceptance of these provisions.*

Signature \_\_\_\_\_

Date \_\_\_\_\_