



## EDUCATIONAL BOOTH

### APPLICATION

Oxnard Insect Festival  
June 1, 2024 • Plaza Park

#### FOR FESTIVAL USE ONLY

Date Received \_\_\_\_\_ Approved \_\_\_\_\_

Space Fee Free Confirmed \_\_\_\_\_

Electricity \_\_\_\_\_ Space # \_\_\_\_\_

Please complete all sections. Incomplete applications will not be accepted. **THE APPLICATION DEADLINE IS APRIL 19, 2024.**

Business / Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

#### Booths providing an education experience and not selling any product are free!

##### Booth Type

##### Qty.

##### BOOTH SIZE

10x10 space \_\_\_\_\_

10x20 space \_\_\_\_\_

##### Additional Options

(check below if needed)

Electricity (per 20 amp hookup)

Canopy 10 x 10  10 x 20

6 ft. table

2 chairs

##### Description - If needed, attach additional sheets.

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Submit this application along with fees to: **Oxnard Insect Festival, 305 W Third St (1st Floor, West Wing), Oxnard, CA 93030.**

#### **VENDOR ACKNOWLEDGMENTS.** Please read and initial each item. Incomplete applications will be rejected.

1. I acknowledge this booth is for educational purposes, selling of any product will not be permitted. \_\_\_\_\_
2. I acknowledge this is a "Rain or Shine" event. \_\_\_\_\_
3. I agree to keep the booth area clean. \_\_\_\_\_
4. I agree to bring sandbags or weights for canopies; stakes/spikes will not be allowed. \_\_\_\_\_
5. I agree to be respectful to patrons and participants. \_\_\_\_\_
6. I agree to arrive NO LATER than 8:30 am and leave NO EARLIER than 4:00 pm. \_\_\_\_\_

#### **WAIVER OF LIABILITY**

In consideration for being permitted to participate in the Oxnard Insect Festival, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which may occur as a result of participation in this activity. This release is intended to discharge in advance The Oxnard Insect Festival, City of Oxnard, Oxnard PAL, its officers, directors and volunteers, sponsors, contractors, sureties and agents from any liability arising out of, or connected in any way with, my participation in this activity, even though that liability may not arise out of the negligence or carelessness on the part of the persons and entities mentioned above. I agree for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless the persons and entities mentioned above and their respective elected and appointed officers, volunteers, official agents, and employees from any and all claims, demands, actions, or suits arising out of or in connection with my participation in the activity.

**I have read the "Waiver of Liability" and the vendor information included with this application form and agree to the terms and conditions as outlined for this activity.**

Participant Signature: \_\_\_\_\_

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

Questions or concerns? Contact us! (805) 385-7995 • [oxnardrec@oxnard.org](mailto:oxnardrec@oxnard.org)