Festivent	NON-FOOD VENDOR APPLICATION Fall Festival @ Plaza Park 10/19/2024• 10 am - 4 pm	FOR FESTIVAL USE ONLY Date Received Space Fee Electricity Fee	Confirmed	
Please complete all sections. Incomplete applications will not be accepted. THE APPLICATION DEADLINE IS SEPT 19, 2024.				
Business / Company Name:				
Contact Name:				
Address:		City:	State: Z	ip:
Phone:	Cell:	E-mail:		
Booth Type ARTS & CRAFT VENDO 10x10 space	Price Qty. Total R \$150 x =	Purpose / Description - If needed, o	attach additional sheets	5.

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

\$200 x \_\_\_\_ = \_\_\_\_

1. I have mailed a check payable to City of Oxnard with my application.

2. I acknowledge this is a "Rain or Shine" event.

3. I agree to keep the booth area clean. \_\_\_\_

10x20 space

4. I agree to be respectful to patrons and participants. \_\_\_\_

5. I agree to arrive NO LATER than 6:30 am and leave NO EARLIER than 6:30 pm.

6. I acknowledge that NO REFUNDS will be issued after this application is submitted.

7. Craft Vendors: please cover ground with a tarp.

## WAIVER OF LIABILITY

In consideration for being permitted to participate in the 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, Recreation & Community Services, City of Oxnard, Oxnard PAL, its officers and volunteers, sponsors, contractors 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 • www.OxnardRecEvents.com