

White Salmon Spring Festival

P.O. Box 116 White Salmon, Washington 98672 <u>www.whitesalmonspringfestival.com</u> Email: <u>wsspringfest@gmail.com</u> Phone: 509-493-2063 Fax 1-503-270-2579

Application for Commercial Food Vendors

This PDF form is computer-fillable, or please type or print clearly

Business				Phone			
Contact Name		Email		_			
Address							
City				State		Zip	
What is your specialty:							
Attach a cop Measurements of your displa	ld by any other vend by of your menu and by unit, including all bble, please include	d your in overhang	surance with s (the maximu	this ap	plication h allowed	1 d in street ar	rea is
		a photo o	of your booth	7	is applic	eation.	
Width	Height			Depth			
Space rental fees are as follow 0-12 feet wide \$1 19-24 feet wide \$2 30-35 feet wide \$2 Electricity is avail	50.00 00.00	$\begin{array}{c} 25-29\\ 36-40 \end{array}$	feet wide \$ feet wide \$2 feet wide \$2 110 outlet.	225.00			
Space rental	Widtl	h			.\$		
Electricity	# of 1	10v outlet	·s .		.\$		
Total fees enclosed					.\$		
Send payment to the address at the top of this page.							

I/We wish to participate in the White Salmon Spring Festival. The individual(s) or organization identified herein hereby agree to, as a condition of participation, indemnify and hold harmless the City of White Salmon and the White Salmon Spring Festival Committee from any and all claims, lawsuits, losses, damages or expenses on account of bodily injury or property damage arising out of or related to my/our participation in the White Salmon Spring Festival.

Further, the said individual(s) or organization agree to defend the City and the Spring Festival Committee against all claims or suits for bodily injuries or property damage arising out of or related to my/our participation in the White Salmon Spring Festival.

I have read and understand all festival guidelines.

Vendor Signature