39th Annual Newington Life. Be in it. Extravaganza

Mill Pond Park, Newington, CT

Saturday, July 18, 2020 — 10:00 am to 10:00 pm

(Rain Date: Sunday, July 19, 2020)

Food Vendor Application

FOOD VENDOR INFORMATION - PLEASE WRITE LEGIBLY.

If your business is requesting multiple food trucks/booths, one form must be completed for EACH one.

Business/Restaurant Name: _____ Contact Person: _____

Street: _____ City: _____ State: _____ Zip Code: _____

Daytime Phone: _____ Cell Phone: _____ Email: _____

Type of Food/Beverages: _____ CT Sales Tax ID #: _____

All products you intend to sell must be listed completely on this application in detail. *Please be as specific as possible.*

Products to be sold: 1.)_____ 4.)_____

2.)_____ 5.)_____

3.)_____ 6.)_____

Please indicate any special needs or requests: _____

_____

Do you have a Food Service Establishment License? (required) _____ Is this your first time participating as a food vendor at Extravaganza? _____

SPACE FEES

Date Application Received	Single Space 10 ft. x 10 ft.	Double Space 10 ft. x 20 ft.
On or before June 1, 2020	☐ $600	☐ $1,200
June 2 - June 30, 2020	☐ $750	☐ $1,500

No applications will be accepted after July 1, 2020.
All equipment, trucks or tables must fit within the space size selected above and may not extend into walkways or adjacent spaces.

☐ I am including an additional $325 to participate on Wednesday night, Thursday night, and Friday night's events.

Total Fee: _____

(See Food Vendor Information, Rules & Requirements for more information

METHOD OF PAYMENT

If paying by cash or check, fee must be submitted with app ication. Checks should be made payable to "Newington Parks and Recreation". Postdated checks will not be accepted. No refunds.

Circle One: Cash Check Credit Card (MC, Visa, Discover)

Credit Card #: __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __

Security Code: __ __ __ Expiration Date: _____ / _____

Return Completed Application & Fee to:

Newington Parks and Recreation Department
131 Cedar Street, Newington, CT 06111
Checks Payable to: Newington Parks and Recreation

Applicants will be notified regarding acceptance once applications have been reviewed. Upon acceptance, a completed Certificate of Insurance must be submitted to the Newington Parks and Recreation Department at the address listed above by July 1, 2020.
Accepted vendors who have submitted all required documentation/fees will be notified of their assigned space and other important details **via email** on or before July 13.

Temporary Food Service Establishment License Application
Available online through CCHD (www.ccthd.org). This form MUST be submitted with the appropriate fee to CCHD, 2080 Silas Deane Highway, Ste. 100, Rocky Hill, CT 06067 by July 1, 2020. It is the responsibility of the food vendor to make sure they are properly licensed.

For additional information, please see the Food Vendor Information, Rules and Requirements

Questions:
Contact: Karen Gallicchio, kgallicchio@newingtonct.gov

Waiver/Assumption of Liability: Participation in this activity may involve risk or injury. I am aware of these hazards and my ability to participate. I hereby agree to release, discharge and hold harmless the Town of Newington, its employees, contracted instructors, and volunteers from the liabilities which may occur while participating in the activity. I understand that participation in any event, recreational or sport activity involves risk. I further understand that the Town of Newington does not provide accident/medical insurance for participants or vendors. The Parks and Recreation Department reserves the right to photograph vendors, participants and booths/spaces for publicity purposes. Please be aware that these photos are for Parks and Recreation use only and may be used in future catalogs, website, social media, brochures, pamphlets, and/or flyers.

I agree to the above Waiver/Assumption of Liability and I also understand and agree to comply with all event rules and regulations as set forth on the Food Vendor Information, Rules and Requirements Form, as well as all State laws regarding sales tax.

_____ _____

Signature **Date**