



FALL CELEBRATION & CRUISE-IN 2022

GENERAL REQUIREMENTS FOR FOOD BOOTH PARTICIPANTS

PARKING IS AVAILABLE ON THE WEST SIDE OF THE COURTHOUSE ANNEX.

The Albion STAR Team is sponsoring a Fall Fest on Saturday, September 17, 2022 “on the square” in downtown Albion. Food booths will be open from 10 am to 2 pm. Set-up of booths may begin at 7:00 AM and must be complete by 9:45 AM on Saturday. All loading/unloading should be expedited so that cars are parked outside of the festival area by 9:30 AM.

EACH FOOD BOOTH MAY SERVE ONE SPECIALTY ITEM. THERE WILL BE NO DUPLICATES: FIRST COME, FIRST ACCEPTED.

Food booth rental is as follows: FOR-PROFIT ORGANIZATIONS: \$25.00

NON-PROFIT ORGANIZATIONS: \$15.00

FOR PROFIT \$25.00

+ \$10.00 IF ELECTRICITY IS REQUIRED (see below)

This fee is nonrefundable and must accompany your application. A copy of your Liability Insurance must also accompany application.

SPACES ARE LIMITED, APPLY EARLY!!!

Deadline: September 1, 2020

You will receive a confirmation specifying which of your food choices you will be allowed to serve upon receipt of your application, liability insurance information, and fee remittance.

VENDOR RESPONSIBILITIES:

Your booth must be open from 10 AM to 2 PM. Early tear-down must be approved by a member of the Albion STAR Team. No vehicles should re-enter the festival area until after 2 PM.

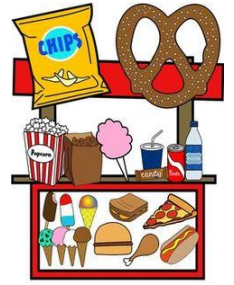
- All Vendors will need a Health Permit from the Noble County Health Dept. Info: 260-636-2191
- The Albion STAR Team reserves the right to ask vendors to remove items not appropriate for sale or any inappropriate decorations.
- State taxes, if applicable, are the responsibility of the vendor.
- No food or drink item may be sold unless listed on your application and approved by the Albion STAR Team.
- Each Vendor is responsible for removal of all materials in their booth, including decorations and trash. Please leave your area in the same condition as when you came. Any vendor not complying with this rule will not be invited to return.

THANK YOU!!

If you have any questions, please call or text Shelli McBride at (260) 610-3412. For additional information or contacts, visit www.albionstarteam.org.

FALL CELEBRATION & CRUISE-IN 2022

VENDOR SPACE REGISTRATION



When: Saturday, September 17, 2022
Where: On the Square
 Historic Downtown Albion, IN 46701

EACH BOOTH MAY SERVE ONE SPECIALTY ITEM. NO DUPLICATES. FIRST COME, FIRST CHOICE.

NAME OF ORGANIZATION/BUSINESS _____

CONTACT/NAME _____

ADDRESS _____ CITY, STATE, ZIP _____

PHONE () _____ CELL () _____

Food you wish to serve. **Must list first & second choices. Only one (1) food specialty per booth.**

FIRST CHOICE _____ **PRICE \$** _____ **SECOND CHOICE** _____ **PRICE \$** _____

Set-up is from 7 AM to 9:45 AM. What time do you want to set up? _____

(All vehicles are to be removed from the closed street to another parking location by 9:30 AM on Saturday.)

Electricity will be provided, if requested in advance. Limited electricity available. (There is a \$10.00 fee for electricity.)

Please list electrical appliances you will be using, and AMPS REQUIRED for each:

Appliances _____ AMPS _____

FEES: For-Profit \$25 _____ Not For-Profit \$15 _____ + Electricity \$10.00 _____ = Remitted \$ _____

(Make check payable to Albion STAR Team)

Fees are nonrefundable and must accompany application with a copy of proof of liability insurance coverage. Each booth will be required to have a Health Permit. (Contact N.C. Board of Health 260-636-2191).

Upon receipt of your application, fees, and liability insurance information, you will receive a confirmation specifying which of your food choices you will be allowed to serve. THANK YOU!

I acknowledge that I have read and agree to abide by the Albion STAR Team policies. I further agree that I am liable for loss, damage and injury to myself or property during the course of the Fall Fest. I also understand that acceptance of this contract by the Albion STAR Team does not oblige the Albion STAR Team to offer me the opportunity to participate in future events.

DATE _____ REPRESENTATIVE _____

Mail form, signed agreement and insurance certificate, and payment to:

**Albion STAR Team
 c/o Shelli McBride
 914 E Seneca St
 Albion, IN 46701**

ALL FEES MUST BE INCLUDED WITH APPLICATION BY SEPTEMBER 1, 2022

Date rec'd _____ By _____

CHOICE ACCEPTED _____ NOT ACCEPTED _____