



Michigan City Festivals

P.O. Box 97, Michigan City, In 46361

Food Vendor Contract

www.michigancityfestivalsinc.com

Please check all that apply. There will be a 10% discount for vendors attending multiple festivals.

- Summer Festival Dates: _____
- Labor Dayz Dates: _____
- Other Dates: _____
- Other Dates: _____

Name: _____ Company Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: Day: _____ Evening: _____ Email: _____

Indiana Tax I.D. # _____ Non-Profit Tax I.D. # _____

List of all menu items to be sold:

WE DO NOT GUARANTEE EXCLUSIVE RIGHTS TO CERTAIN CRAFTS OR COMMERCIAL VENDORS.

If you register under handmade, the items must be just that, handmade (made by you), if you should arrive and the committee finds your items to be commercial (bought) we will ask you to pay the difference and have you move into the commercial area. If you have items that are partially handmade and some commercial (store bought) products then you must pay for the appropriate category below.

VENDORS SPACES WILL BE ASSIGNED ON A FIRST COME BASIS.

Final approval and placement is at the discretion of the Festival Committee.

Commercial Food Vendors:

I require _____ space(s) for trailers up to 24'
(if returned on or before May 15) X \$500.00 each = \$ _____
(if returned after May 15) X \$550.00 each = \$ _____

Electrical Hookup Required: No Yes I will require 110 volt outlet 220 volt outlet

Water Hookup Required: No Yes

PLEASE MAIL COMPLETED CONTRACT AND FEE TO:
Michigan City Summer Festival
ATTN: Arts & Crafts Chairperson
P.O. Box 37
Michigan City, IN 46361

Non Profit Food Vendors (must have proper ID):

I require _____ space(s) for trailers up to 24'
(if returned on or before May 15) X \$250.00 each = \$ _____
(if returned after May 15) X \$275.00 each = \$ _____

Electrical Hookup Required: No Yes I will require 110 volt outlet 220 volt outlet

Water Hookup Required: No Yes

Additional parking passes: I will require _____ additional passes x \$5.00 each _____

\$ TOTAL: _____

10% DISCOUNT if you have signed up for multiple festivals and payment is made in full before first day of festival.

\$ TOTAL PAYMENT ENCLOSED: _____

All Vendors must provide the following:

- Signed copy of this contract and above vendor fee by check or money order payable to: Michigan City Summer Festival / Labor Dayz.
- Each vendor must attach a copy of an insurance certificate listing the following as an Additional Insured:
 - City of Michigan City,
 - Michigan City Parks and Recreation Department,
 - Michigan City Summer Festival Committee, Inc.
- Photo or diagram of setup with dimensions.
- Late arrivals will not be permitted without Festival committee approval. No refunds will be issued.

Additional Information:

- Vendors must furnish all display fixtures: chairs, tables and coverings, risers and canopies.
- Electricity and water are included in your vendor fee (vendor to supply connections to water and electric).
- All spaces will be assigned by committee, NO EXCEPTIONS.
- All items must be truthfully represented. The committee reserves the right to cancel the contract, at any time, if the exhibitors stock is deemed unacceptable to the event or is not fully disclosed in the contract.
- All items must be clearly priced, PRICING IN CODE IS PROHIBITED.
- Set up for the festival will commence at 9am on the date assigned. Vendor hours will be from time of completion of set up (NO LATER THAN 4:00pm) to 9pm. Each additional day you must be open by 12 noon. Vendor shall remain open from 12 noon until at least 9:00pm each day unless the Festival Committee has granted permission otherwise, except Monday, which is 12 noon to 6:00pm.
- Any vendor who cancels within 30 days prior to the event will forfeit ALL fees.
- The Festival committee is absolved of any and all responsibility and or liability due to damage, theft or injuries resulting from contracting organizations participating in the Festival.
- All returned checks are subject to a \$50.00 service charge and will be presented only once.

Vendor Signature: _____

Date: _____

MCF Rep Signature: _____

Date: _____

FOR COMMITTEE USE ONLY
DATE REC _____
CK # _____ AMT \$ _____
SF LD