



**Broomfield Days Application
Non Profit Organizations
Food, Games, Activities, Display
www.broomfieldrecreation.com
303-460-6903/303-464-5515 fax**

- Fee must accompany your application.
- Health Department Application Forms **Must** be Approved by the Health Department **before** your Vendor application will be approved
- Space Size Is 10 X 10 - No Trailers Without Approval - Additional Spaces Cost More And Must Be Approved
- Applications accepted until Sept. 4, 2009 or until the event is full
- We ask that no items be given away. Giveaways cut into the fundraising efforts of all the booths. Please charge reasonable and competitive prices, obvious undercutting will warrant removal from the event.

ORGANIZATION _____
 CONTACT PERSON 1. _____
 ADDRESS _____ CITY _____
 ZIP _____ PHONE (W) _____ (H) _____

Please provide an e-mail address where your organization can be contacted.
E-MAIL _____

CONTACT PERSON 2. _____
 ADDRESS _____ CITY _____
 ZIP _____ PHONE (W) _____ (H) _____

NON-PROFIT FEDERAL ID NUMBER _____
LIST ALL BOOTH ACTIVITIES AND/OR ITEMS TO BE SOLD: _____

ELECTRICITY? YES ___ NO ___ (20 amp service only) List appliances to be used _____

GENERATOR? YES ___ NO ___ **Please see "Generators" in the Vendor Information Document. No microwaves will be allowed.**

WILL YOU SET UP ON FRIDAY? _____ WHAT TIME? _____

ARE YOU USING A TARP OR TENT? _____ WHAT SIZE? _____

- **All Food Vendors must attend a Mandatory Food Service Training**
 All trainings are held at the Paul Derda Recreation Center – 13201 Lowell Blvd., Broomfield Co 80020. 303-460-6900 x 0.
 Thursday September 3 7-8 PM
 Wednesday September 9 7-8 PM
 Wednesday September 16 7-8 PM

OFFICE USE ONLY	\$ PAID	\$ OWE	DATE RCD
# OF SPACES	ELEC	GEN	SPACE
Health	Insurance	Zero Waste	Conf Letter Sent

APPLICATION FEES

NON PROFIT – 100% OF ALL PROFIT MUST GO TO THE NON-PROFIT

1. Broomfield Non-Profit Org.	2. Non-Broomfield Non-Profit Organization
Fee W/Elec.	Fee W/Elec.
\$50 \$55	\$65 \$70

PAYMENT OPTIONS: Application will not be processed until payment is received.

1. MC VISA Am Express # _____ Exp Date _____

2. CHECK

MAKE CHECKS PAYABLE TO : CITY OF BROOMFIELD

MAIL TO: BROOMFIELD DAYS
DROPOFF AT: PAUL DERDA REC. CENTER
 13201 LOWELL BLVD.
 BROOMFIELD CO 80020

3. CASH - Do not send cash through the mail!

DID YOU REMEMBER TO....

- **DOWNLOAD AND READ ALL VENDOR INFORMATION**
- **DOWNLOAD ZERO WASTE INFORMATION AND AGREEMENT**
- **DOWNLOAD INSURANCE INFORMATION**
- **SEND VENDOR APPLICATION AND PAYMENT**
- **DOWNLOAD HEALTH DEPARTMENT INFORMATION AND FORMS**
- **SEND HEALTH DEPARTMENT FORM AND PAYMENT**
- **DOWNLOAD AND READ SALES TAX INFORMATION**

RELEASE: As a participant in the Broomfield Days Festival, I fully understand and agree to the following:

I recognize and acknowledge that I assume full risk of any injuries, property damage or loss which I may sustain as a result of my participating in any and all activities connected with or associated with my participation in the Festival. Further, I understand I store my products overnight and during the festival at my own risk.

I agree to waive and relinquish all claims I may have against the City and County of Broomfield, Broomfield Recreation Services, all associated festival sponsors and any agents thereof, as a result of my participation in the Festival and that I share my products and services at my own risk.

Contractor expressly agrees to indemnify and hold harmless the City and County of Broomfield or any of its officers, employees, elected official or insurance carriers from any and all claims, damages, liability, or court awards, including costs and attorney's fees, that are or may be awarded as a result of any loss, injury, or damage sustained or claimed to have been sustained by anyone, including but not limited to, any person, firm, partnership, or corporation, in connection with or arising out of any omission or act of commission by Contractor or any of its employees or agents in performing work pursuant to this Agreement or **arising out of, connected with, or in any way associated with the activities of the Festival.**

I agree that all demonstration and exhibits may be photographed for publicity purposes.

I agree to abide by all rules set forth in this application.

I agree to abide by the Zero Waste Agreement. (Please see Zero Waste Agreement)

Applicant's Name (print)

Applicant's Signature

Date