



Presents:
2nd Annual 5K Run & Free 1 Mile Family Run/Walk
 For
National Infant Mortality Awareness Month

Saturday, September 14, 2013 at Waterfront Park, 8119 Old Post Road, Port Richey

VENDOR BOOTH SPACE RESERVATION FORM

For office use only

Date Rec'd	
Paid	

Return Application and Fees to:
Healthy Start Coalition of Pasco, Inc. P.O. Box 1527 New Port Richey, FL 34656-1527
Make checks payable to the Healthy Start Coalition of Pasco, Inc.
For Vendor/Booth Space related questions contact: Wendy Seymour at (727) 841-7888

Name of Org/Company/Individual: _____

Not for Profit Organization: (Yes/No) _____

Contact Person: _____

Address: _____ City _____ Zip _____

Telephone: (H or C) (W) _____ Alt Phone: _____

Booth Space Rental	Cost Each (10'X10')	Number Required	Total Amount
For Profit	\$100.00		
Non- Profit	\$50.00		
Plat, Gold, Silver Sponsor	1 Included in Sponsor fee		

Type of Booth: Food Handmade Crafts Informational Commercial

Describe your booth and what information, products or services you will be offering:

TENTS, TRAILERS, TABLES, EQUIPMENT, SUPPLIES, etc.

- Booth space is assigned in 10'x10' increments.
- It is the responsibility of the vendor to determine that their tent, trailer or other equipment will fit ENTIRELY into their assigned booth space. If not the vendor must obtain two booth spaces at time of application. If an additional booth space is determined to be needed and not reserved until after the application deadline or at day of event, a late fee of \$20.00 will be assessed plus the cost of the additional booth space and the vendor may be required to relocate.

BOOTH SETUP/TEAR DOWN

- Booth set up is from 5:30A.M. – 6:30A.M. No vehicles will be allowed into the resource fair area during the event, except for designated areas assigned by the Infant Mortality Awareness Committee. All supplies needed must be brought in during setup time or thereafter brought in by foot.
- Cleanup of vendor area in the responsibility of the vendor. Failure to clean up area will affect future applications for booth space.

APPLICATION REVIEW & ACCEPTANCE POLICY

- All applications will be considered on a first come first served basis
- All applications are subject to final review and approval by the Healthy Start Coalition of Pasco Infant Mortality Awareness Committee for suitability to the goals of the event. In the event that you are not accepted, your application fees will be returned to you.

WAIVER OF LIABILITY

By signing this application, I/We hereby waive, release and discharge any and all claims for damages for personal injury, death or property damage which may occur as a result of participation in the Healthy Start Coalition of Pasco, Inc. 2nd Annual 5K Run & FREE 1 Mile Family Run/Walk. This release is intended to discharge in advance the Healthy Start Coalition of Pasco, Inc., its committees, agents, contractors and volunteers from any liability arising out of, or connected in any way with, my/our participation in said activity, even though that liability may rise out of the negligence or carelessness on the part of the persons or entities mentioned above. I/We agree for myself, my organization, my company, my heirs, administrators, executors and assigns, that I/We shall indemnify and hold harmless the persons and entities mentioned above and their respective elected and appointed directors, officers, official agents, employees and volunteers from any and all claims, demands, actions or suits arising out of or in connection with my participation in this event. I further agree to indemnify and hold harmless the Healthy Start Coalition of Pasco, Inc. for any claims, losses, or liabilities arising from the my/our acts, omissions, negligence, or misconduct.

APPLICATION AGREEMENT

With my signature I/We affirm that I have read and agree to comply with the terms and conditions of this agreement. I agree to follow all health and safety codes of the City of Port Richey, as applicable to my vending class. I acknowledge that failure to adhere to this agreement may result in my vendor permit being revoked without refund. I understand that application deadline is September 7, 2013 and that my application received after this date will be subject to a \$20.00 late fee to be accepted. This fee can only be waived by approval of the Healthy Start Coalition of Pasco Infant Mortality Awareness Committee. I understand that the booth fee is non-refundable and that the event will be held rain or shine.

AUTHORIZED SIGNATURE:

_____ Date _____