



Norman Borlaug Harvest Fest

~ September 16, 2017 ~ Cresco, IA

Food Vendor Form

Business/Organization Name: _____

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

Telephone: _____ Fax #: _____

Contact Name: _____ Title: _____ Email: _____

Description of food to be sold & prices of each item:

Vendor Rate _____ **\$40 Vendor Fee** **Paid Check #** _____

Day: Saturday Sept. 16 **Expected Serving Times:** _____

Please specify any Special needs or inquiries: [i.e. electrical needs (how many plugs, amps) water, etc.]

GENERAL POLICY –

- Applicant must abide by the organizing principle of Norman Borlaug Harvest Fest committee
- We reserve the right to reject any application, refuse space or close any booths, sales, or displays deemed detrimental to the success of the Celebration or in violation of local ordinances.
- Concession space is not transferable nor may it be subdivided.
- Vendor is solely responsible for all of its agents, employees or independent contractors.
- Vendor is solely responsible in collecting and paying Iowa sales tax.
- Vendor is solely responsible for own insurance and applicable local and state permits.

RELEASE OF LIABILITY: *In consideration of my application being accepted, I hereby for myself, personal representatives and executors, waive, release, and forever discharge any and all rights and claims for loss or damages which I may have or may hereafter accrue to me against the organizers and sponsors of the Norman Borlaug Harvest Fest, patrons, employees and supporters for any and all injuries which might be suffered by me in said event. Further, I hereby grant full permission to any and all of the foregoing to use my name, photographs, videotapes, motion pictures, recordings or any other record of this event for any legitimate purpose, without compensation or remuneration.*

**Please return the complete application via email/fax/mail.
Make check made payable to Norman Borlaug Harvest Fest and mail it to:**



Cresco Area Chamber of Commerce
101 2nd Ave SW Cresco, IA 52136
Phone# 563-547-3434 ~ Fax# 563-547-2056

Please direct all questions to 563-547-3434, email kelli.gosch@cedausa.com

Visit www.crescochamber.com for updates on Schedule of Events

By signing this form you agree to the terms and conditions of the fest and all applicable laws of the state of Iowa.

Printed Name of Vendor (Representative): _____

Signature of Vendor (Representative): _____ Date: _____