

Food / Beverage / Ice Cream Vendor Application

Name of Business		
Contact Person		
Address		
City State Zip		
E-Mail Address		
Phone Number Fax Number	Cell Number	
No. of spaces (1) (2)		
List your electrical requirements (please be specific)		
 Electricity is limited and may be denied to la Vendor must supply their own extension co You must specify the type of outlet used. 	ate entries.	
Length of trailer including tongue or tent size		
Description of food items to sell (please be specific). of your set-up <u>MUST</u> be attached to this application	,	

Make checks payable to <u>EDEN RIVERFEST</u>. Please complete this application and mail your entry fee of \$175 per 10'x10' booth by Aug. 15 to:

Cindy Adams P.O. Box 70 Eden, NC 27289--0070

PLEASE NOTE THE FOLLOWING:

- Food vendors will be within a food court.
- All booth spaces must be left clean and litter free.
- Please have grease controls in place. No grease or gray water is to be poured onto the ground or down any drains. Anyone found doing this will be asked to leave the event. You will be held responsible for any and all environmental clean-up costs.
- All menu items along with pricing must be posted.
- The sale of alcoholic beverages is prohibited.
- There will be no refunds because of cancellations due to heavy rain, weather natural disasters or other extreme weather conditions.
- YOU ARE REQUIRED TO COMPLY WITH ROCKINGHAM COUNTY ENVIRONMENTAL HEALTH STANDARDS and THE EDEN FIRE DEPARTMENT.

WAIVER OF LIABILITY/PARTICIPATION AGREEMENT

In consideration of the City of Eden's permission and reservation of my space during the Eden RiverFest, I for myself, my heirs, executors and administrators hereby release indemnify and hold harmless the sponsors, organizers or officials of the Eden RiverFest/City of Eden its agents, officers and employees and volunteers from any and all responsibility or liability for any and all damage, injury or illness of any kind or nature whatever to all persons and to all property proximately caused by, incident to, resulting from, arising out of, or occurring in connection with, directly or indirectly, my participation in the Eden RiverFest. I further state that I am in proper condition to participate in this festival. I agree to abide by the Rockingham County Environmental Health standards.

Signature	Date

Eden RiverFest reserves the right to deny any and all applications.



If you have any questions concerning the event, email cadams@edennc.us or call 336-612-8049.

THANK YOU FOR BEING A PART OF RIVERFEST 2025!