



2022 Mall Market Vendor Application: Sept 17 & 18, 2022

Application Process

- ❖ Mall Market Vendors can apply for the festival by filling out the attached application form and mailing it along with booth fee, and proof of insurance.
- ❖ All vendors are required to show proof of liability insurance. **See rules and regulations for additional requirements.**
- ❖ If the committee declines your application, your check will be returned immediately. All decisions of the committee are final.

Deadlines This is a Full Festival and is on a first come basis. No application will be accepted after September 1st, 2022, unless accompanied with a nonrefundable \$50 late fee along with your application form. NO refunds of accepted vendors will be made after September 1, 2022.

This is a Full Festival and is on a first come basis. Returning vendors may have a booth location preference if submitted prior to August 1, 2022.

Name (please print) _____

Name of Business if different _____

Mailing address _____

City, State, zip _____ email address _____

(Required for confirmation and information)

Daytime Phone Number _____

Description of booth items

Fee Schedule

<input type="checkbox"/> Display Booth 10X10	\$140	<input type="checkbox"/> Display Booth 10X20	\$225
<input type="checkbox"/> Electricity (optional)	\$ 15	<input type="checkbox"/> Electricity (optional)	\$ 15
<input type="checkbox"/> Late fee(non refundable)	\$ 50	<input type="checkbox"/> Late fee(non refundable)	\$ 50
Total of check _____		Total of check _____	

Your Signature below indicates that you have read and accepted all regulations, conditions and provisions as specified in the rules and regulations. You agree to protect and hold harmless the Coos Bay Downtown Association board, City of Coos Bay and all sponsors of this event, their successors, representatives, and assigns, for any injuries, accidents, or losses suffered while participating in The Bay Area Fun Festival. Payment must accompany all applications. Please make checks payable to CBDA. All Applications and attachments, mail to Coos Bay Downtown Association, Bay Area Fun Festival Committee, 320 Central Ave Suite 410 Coos Bay, Oregon 97420.

 Signature date

ARE YOU A RETURNING VENDOR? YES NO Booth space preference(not guaranteed) _____

A security/cleaning deposit check of \$100 will be required at time of check in. This check will be returned at the end of the festival after your booth area has been cleared and all requirements have been met.

Office Use Only: Approval Y N proof of insurance Y N Paid in full Y N Date Notified _____
Initials _____ check# _____ cash _____ DL _____ SS _____



Food Vendor Application: Sept 17 & 18, 2022

Application Process

- Food vendors can apply for the festival by filling out the attached application form and mailing it along with booth fee, a photo of your booth/trailer, menu, and proof of insurance.
- All applications will be approved by the Bay Area Fun Festival Committee.
- If the committee declines your application; your check will be returned immediately. All decisions of the committee are final.
- All vendors are required to show proof of liability insurance. **See rules and regulations for additional requirements.**
- Vendors must comply with Coos County Health Department health permit regulations. Contact Coos Health and Wellness at (541)266-6700

This is a Full Festival and is on a first come basis. Applications submitted after August 31, 2022, must be accompanied with full payment and a \$50 late fee. There is no guarantee of space available. There are no refunds for cancellations after September 1, 2022.

Name (please print) _____

Name of Business if different _____

Mailing address _____

City, State, zip _____ email address _____
(Required for confirmation and information)

Daytime Phone Number _____

Description of booth and complete menu

Menu items must be disclosed to avoid severe duplications. CBDA does not dictate menu prices. Any items not approved will not be allowed in the festival and you will be required to remove them. No refunds will be given for misrepresentation of your goods

Fee Schedule

___ Food Booth/trailer 10X10	\$175	___ Food Booth/trailer 10X20	\$300
___ Electricity (optional and limited)	\$ 15	___ Electricity (optional and limited)	\$ 15
___ Late fee(nonrefundable)	\$ 50	___ Late fee(nonrefundable)	\$ 50
Total of check	_____	Total of check	_____

Your Signature below indicates that you have read and accepted all regulations, conditions and provisions as specified in the rules and regulations. You agree to protect and hold harmless the Coos Bay Downtown Association board, City of Coos Bay and all sponsors of this event, their successors, representatives, and assigns, for any injuries, accidents, or losses suffered while participating in The Bay Area Fun Festival. Payment must accompany all applications. Please make checks payable to CBDA. All Applications and attachments, mail to Coos Bay Downtown Association, Bay Area Fun Festival Committee 320 Central Ave Suite 410 Coos Bay, Oregon 97420.

Signature _____ date _____

ARE YOU A RETURNING VENDOR? YES NO Booth space preference(not guaranteed)_____

A security/cleaning deposit check of \$100 will be required at time of check in. This check will be returned at the end of the festival after your booth area has been cleared and all requirements have been met.

Office Use Only: Approval Y N proof of insurance Y N Paid in full Y N Date Notified _____
Initials _____ check# _____ cash _____ DL _____ SS _____



Non Profit Application: Sept 17 & 18, 2022

Application Process

- Non Profit Organizations can apply for the festival by filling out the attached application form and mailing it along with booth fee, if applicable, and proof of insurance. Non Profit Organizations booth spaces are **limited** and on a first come basis.
- Description of your booth activity must be accompanied with your application and must fit the criteria of the festival.
- All Food Vending must comply with Coos County Health Department health permit regulations. Contact Coos Health and Wellness at (541)266-6700
- If the committee declines your application; your check will be returned immediately. All decisions of the committee are final.
- All vendors are required to show proof of liability insurance. See rules and regulations for additional requirements

This is a Full Festival and is on a first come basis. Applications submitted after August 31, 2022 must be accompanied with full payment and a \$50 late fee. There is no guarantee of space available. There are no refunds for cancellations after September 1, 2022.

Name (please print) _____

Name of Business if different _____

Mailing address _____

City, State, zip _____ email address _____

(Required for confirmation and information)

Daytime Phone Number _____

Description of booth items and/or menu items

Fee Schedule

__ Booth 10X10 informational only	\$ 50	no double booth information space available	
__ Display Booth 10X10	\$140	__ Display Booth 10X20	\$225
__ Electricity (optional)	\$ 15	__ Electricity (optional)	\$ 15
__ Late fee(non refundable)	\$ 50	__ Late fee(non refundable)	\$ 50
Total of check _____		Total of check _____	

Your Signature below indicates that you have read and accepted all regulations, conditions and provisions as specified in the rules and regulations. You agree to protect and hold harmless the Coos Bay Downtown Association board, City of Coos Bay and all sponsors of this event, their successors, representatives, and assigns, for any injuries, accidents, or losses suffered while participating in The Bay Area Fun Festival. Payment must accompany all applications. Please make checks payable to CBDA. All Applications and attachments, mail to Coos Bay Downtown Association, Bay Area Fun Festival Committee 320 Central Ave Suite 410 Coos Bay, Oregon 97420.

Signature

date

ARE YOU A RETURNING VENDOR? YES NO Booth space preference(not guaranteed)_____

A security/cleaning deposit check of \$100 will be required at time of check in. This check will be returned at the end of the festival after your booth area has been cleared and all requirements have been met.

Office Use Only: Approval Y N proof of insurance Y N Paid in full Y N Date Notified _____

Initials _____