



FOOD TRUCK “FEAST-FUR-ALL” VENDOR APPLICATION

Please join us on Saturday, June 19th, 2021 for the food truck Feast-Fur-All with 30+ Food Trucks of all varieties! There will be BEER, MUSIC, FUN ACTIVITIES FOR KIDS & FREE PARKING for Guests!!! Last year's festival drew a huge audience (4000+) and we expect a similar if not greater turnout again!! The town has already been talking about it!

Thank you for your interest as a Food/Merchant Retail Vendor at the 2021 Food Truck Feast-Fur-All hosted by The Shadows Foundation.

Food Vendor: Please forward all questions to Rebecca Wallace info@biooneflagstaff.com or call 928-863-8276.

Merchant/Retail Vendors: Please forward all questions to Vicki Burton at vicki@shadowsfoundation.com or call 928-380-6641.

Complete and return the enclosed application. You will receive confirmation when your application is received. Submission of an application **does not guarantee** acceptance to the event, due to limited space.

Terms & Conditions: Incomplete registrations and incomplete required forms will **NOT** be accepted. We are looking for a variety of food trucks/merchant vendors. We reserve the right to refuse an application based on our judgment concerning quality and content as well as any items that do not meet our event standards.

Required Items for Consideration and Acceptance:

- Completed Application: Food OR Retail Vendor
- City of Flagstaff Business License (If Applicable)
- Coconino County Health Permit
- Certificate of Insurance - Listing Shadows Foundation & Coconino County additionally Insured
- Booth Site Plan and/or Pictures
- Menu Items and Prices (\$5 menu items)
- Copy of last fire inspection (if hoods are present)

ONCE ACCEPTED PAYMENT WILL BE REQUIRED AND PROCESSED:

EVENT LOCATION: Fort Tuthill County Park, 2446 Fort Tuthill Loop, Flagstaff, AZ 86005

FOOD

- Security Deposit \$100.00
- Food Vendor Fee \$150.00

RETAIL

- Security Deposit \$100.00
- Retail Vendor Fee \$100.00

FOOD VENDOR ENTRY FEE: Food vendor will pay **\$150 to participate**. Check must be made out to "Shadows Foundation". We are asking **each of our food vendors to donate 2 meals for our volunteers assisting with setting up/running of this event. They will be given a meal voucher with your name on it and give to you. We are also asking our food vendors to honor any food vouchers that they may receive by our attending Coconino Country "Hike for Hops" attendees. All food vendors receiving these vouchers will be reimbursed by Shadows \$10 for each voucher they receive. Should you need to create a meal(s) to accommodate both the volunteer donated meal voucher and "Hike for Hops" voucher please do. We ask that this menu is posted and stated clearly so that they are aware of what their choices are. We would also ask that you provide this menu to us so that we can provide for them as well. Please note they may only redeem meal vouchers at your food trucks NOT beverage voucher. Entry Fee includes electricity for Food vendors.**

MERCHANT/RETAIL ENTRY FEE: Merchant/Retail vendors will pay **\$100 to participate**. Check must be made out to "Shadows Foundation". Each Merchant/Retail vendor will be provided an area which will accommodate a 10X10 easy up. Should you require additional space please provide a description of your needs.

SECURITY DEPOSIT: There will be a **\$100 refundable** security deposit for both Food/Merchant Retail Vendors also payable to "Shadows Foundation". **This security deposit MUST be made on a SEPARATE check** and will be returned if you adhere to the following:

I AGREE TO:

- (1) adhere to the scheduled set-up and tear down
- (2) remain open the hours required (1pm to 8pm)
- (3) have your sample available for entirety of event (2pm to 8pm)
- (4) leave your area clean of all boxes, trash, grease stains
- (5) Deposit all trash in the trash dumpsters.
- (6) Not breaking down before 8 pm and no vehicles on site until then.
- (7) Accept at least one form of credit/debit card payment.

Initial _____

Check(s) must be made out to:

The Shadows Foundation c/o Food Truck Feast-Fur-All

P.O. Box 3026, Flagstaff, AZ 86003

*******We ask at the end of the event, IF you did well, please consider making a donation to the Shadows Foundation who provides financial assistance to those who are battling life threatening diseases, our first responders and now assistance to our four-legged family members! *******

SET UP & HOURS: Saturday, June 19th, 2021 Arrival and set up will be between 7am and 1pm **Vendors must be set up 1 hour prior to event and all vehicles must be out of the facility at this time.** Tear down begins immediately following the event. PLEASE DO NOT BRING EXTRA VEHICLES INTO FACILITY UNTIL INSTRUCTED. NO VEHICLES WILL BE ALLOWED IN FACILITY FROM 12PM TO 8PM. ALL TRUCKS MUST REMAIN PARKED UNTIL THE EVENT IS OVER. **NO EXCEPTIONS.**

Due to congestion at the facility we will have designated arrival times to allow for the easiest arrival and placement for everyone! (You will be contacted regarding your arrival time) PLEASE SPECIFY THE SIZE OF YOUR VEHICLE, **WHICH SIDE OF THE TRUCK/TRAILER YOU SERVE OUT OF** AND IF IT IS BEING TOWED.

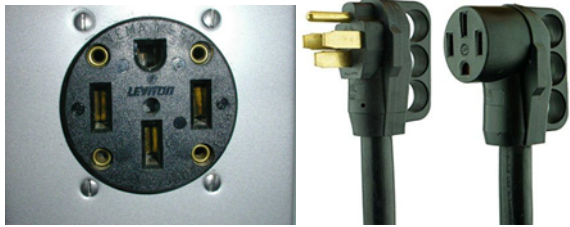
SIZE: _____ Are you towing? Yes No

SERVING OUT OF: PASSENGER SIDE DRIVERS SIDE

Initial _____

ELECTRICITY:

Electricity will be provided! The facility has about 40 different 50 AMP Plugs all on their own Breakers. Please bring your own extension cords and proper conversion plugs so that you can connect to these set ups. Generators are allowed but MUST be quiet. **NO EXCEPTIONS!** PLEASE SPECIFY WHETHER OR NOT YOU HAVE THE PROPER EQUIPMENT TO HOOK UP TO THIS STYLE OUTLET:



Please draw a picture of your plug.

Please supply a brief description of your generator below.

Yes: _____ No (Need adapter): _____ What type of plug DO you have? _____

SECURITY: Security will be provided.

LIABILITY: Shadows Foundation and Coconino County are not responsible for any loss or damage to your property in any form before, during, or after the event.

INSURANCE: We require Certificate of Insurance for a minimum of \$1 million liability with the following named insured.

Shadows Foundation * P.O. Box 3026 * Flagstaff AZ. 86003

CANCELLATION: ALL cancellations must be made in writing no later than May 19, 2021. A 100% refund will be given if proper notification is received no later than 30 days PRIOR to the event.

Initial _____

VENDOR INFORMATION:

VENDOR NAME: _____

Owner Name: _____

E-Mail Address: _____

*STATE TPT (transaction privilege tax) Number: _____

Health Department Permit Number for Coconino County (If Applicable): _____

Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Describe your menu/merchandise below. Please be specific on the products you are vending; we want to have a variety of items.

M e n u i t e m s h a v e t o b e a p p r o v e d :

Menus can contain as many items as you would like. **HOWEVER, you must include at least (1) sample item valued at \$5 and must be available for 6 hours of the event.** Sample items cannot be sodas, waters or sides of fries, they must be real items. We recommend a smaller version of one of your favorites. ****It is imperative that you are prepped, stocked and committed to sell your entire menu throughout the duration of the event. As well as have enough \$5 Sample Items to last 6 hours of the entire event. **We recommend you make this something special to showcase what your truck can do. We sold over 150 of our samples last year so know that it will be popular and make enough to last 6 HOURS!**

Please describe your \$5 Sample Item:

TRUCK/TRAILER SIZE:

Below: Please draw a basic photo to indicate direction of serving windows. Please indicate serving or selling side (driver side or passenger side), the dimension of the truck or trailer including the hitch and any open awnings.

TRUCK _____ or TRAILER _____



Will you be putting up a shade tent? Yes____ No____ Size of tent_____ Is this included in the above? _____

NO EXCESSIVELY LARGE SETUPS WILL BE ALLOWED By the discretion of event staff.

Be courtesy to your fellow vendors, do not block them, do not interfere with them conducting business.

NO STAKES are to be driven into the ground. Please use heavy duty weights, such as concrete or water, as tie downs. **HIGH WINDS ARE ALWAYS POSSIBLE!** If a vendor does not have adequate weights and an incident occurs, they will forfeit their deposit and be responsible for **ALL** damages.

ALL Tie downs, trailers, ice chests and awnings must be contained within your allotted space.

Initial _____

PHOTO RELEASE:

I grant to the Shadows Foundation, its representatives and employees the right to take photographs of me and my property in connection with the event "Feast-Fur-All 2021". I authorize the Shadows Foundation, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that the Shadows Foundation may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content. I have read and understand the above:

Initial _____

HEALTH DEPARTMENT

Coconino County Trucks must have all permits up to date and in good standing with Health Department. For all out of County Vendors: Attached to this email is the Coconino County temporary food permit application. Please fill out and submit the application at least 10 business days ahead of the event or there is a \$50 late fee. It can be submitted via email, fax, or regular mail. If vendors need more space on the application, please add as many pages/details as necessary - more is appreciated!

Here are the temporary food service requirements for Coconino County:

- <https://az-coconinocounty2.civicplus.com/DocumentCenter/View/513>
- Please take a look at the requirements as each county may vary slightly.

Here is a link to the commissary agreement:

- <http://www.coconino.az.gov/DocumentCenter/View/495>
- If a food truck is using a licensed kitchen commissary that is not their own restaurant, they must fill out and submit a commissary agreement.

ALL vendors must make copies and submit their food handler's cards with their application to the:

CCPHSD Flagstaff Office

2625 N. King St., Flagstaff, AZ 86004

Ph: (928) 679-8760 Ph: (877) 679-7272 Fax: (928) 679-8771

Initial _____

Health Department COVID Restrictions

By initialing below and registering for Shadows' Foundation's event, I acknowledge that I agree to abide by the CURRENT (*DAY OF EVENT*) COCONINO COUNTY AND CDC COVID-19 SAFETY GUIDELINES. I also understand that the day of the event, MYSELF AND ALL EMPLOYEE'S/VOLUNTEERS will be required to complete a COVID-19 Self Screening Questionnaire. Failure to complete it will result in not being allowed to participate in the event with no possibility of receiving a refund for the registration fee.

Initial _____

ALL ACCEPTED VENDOR APPLICATIONS MUST BE COMPLETED AND TURNED IN BY JUNE 1st. 2021. APPLICATION MUST BE COMPLETE WITH ALL REQUIRED PAPERWORK AND PAYMENT.

Please send entry Application with all the required paperwork to:

Shadows Foundation

Attn: Vicki Burton

P.O. Box 3026, Flagstaff, AZ 86003

Or email to vicki@shadowsfoundation.com and info@biooneflagstaff.com

VENDOR/BUSINESS

I Agree: I have read and agree to abide by the guidelines set forth by the Shadows Foundation. I understand I can be denied participation for any reason.

VENDOR/BUSINESS:

Name(Print) _____ Date _____

Signature _____

***KEEP A COPY OF THIS FORM FOR YOUR INFORMATION**

Note: If you are able to bring any 6 or 8 foot tables and folding chairs for customers to sit at in your areas please let us know. We will be providing seated shaded areas as well for our guests but any help to provide additional seating is appreciated!

of Tables _____ **Size of Tables** _____ **Chairs** _____