VENDOR APPLICATION FORMS

VENDOR APPLICATION DEADLINE: August 30th

DATE: September 9th, 10am-2pm, rain or shine.

SET-UP: Booths must be completely set up, ready for sales starting 45 minutes before event.

TEAR DOWN: NO EARLY TEAR DOWN ALLOWED.

LOCATION: Area around the Alvin Historical Museum

BOOTH SIZES AND FEES: 10’ x 10’, $50.00 cost

FOOD TRUCKS: $50.00 cost, must have valid city of Alvin Food Permit

ELECTRICAL: No electrical will be provided

Sorry, no unloading assistance will be available. Vendors must provide their own tables, chairs, etc. Spaces assigned on first-come, first-served basis, by application date. Spaces will be assigned to try to avoid having similar products side by side. This is a rain-or-shine event and there will be no refunds for bad weather.

The Hispanic Heritage event committee reserves all rights to rearrange booths as needed to allow for accessibility to all vendors and spectators. ONLY Hispanic Heritage event Committee may make changes to the location of booths.

APPLICATION: The application may be printed, filled-out and mailed to Alvin with Payment to:

Alvin Museum Society
302 W Sealy St
Alvin, Tx 77511

PAY ONLINE: www.alvinmusuem.org

HAND DELIVERED APPLICATION WITH PAYMENT:
Alvin Museum Society
Tuesday - Saturday for 11:00 am to 3:00 pm

No food items on-premises for consumption may be sold from any booths unless it is a food vendor. The Vendors selected will receive confirmation immediately.
UNLOADING/LOADING: After unloading, vendors will be directed to nearby off-site parking. Parking for Vendors will be on the West Side of the vacant Stanton’s parking lot.

OVERNIGHT ACCOMMODATIONS: The Alvin Convention & Visitors Bureau has complete lodging information at 281-388-4212 or visit website at www.visitalvin.com/ or email cvb@cityofalvin.com

Please type or print clearly. Application must be accompanied by full payment

Name_________________________________________________________________

Name of business, if any__________________________________________________

Address _______________________________________________________________

City___________________________________ State ______ Zip ________ Phone_________________

E-mail _________________________________________________________________

Web site ___________________________________________

What will you sell? Art/Handcrafted items _____ Retail items _____ Food Vendor _____

Check items you will sell: _____ Retail items _____Jewelry ____Purses/Accessories ____ Candles ____

Sports _____ Home Décor _____ Garden Décor _____Plants _____Cards/Paper ____ Pottery ____

Spa/Beauty ____Holiday ____ Photographs ____ Flowers/Produce ____ Paintings ____ Other _____

(Anyone seeking to promote services needs to contact us about sponsorship opportunities)

_____________________________________________________________________________________

_____________________________________________________________________________________

Number of Booths Requested _______ @ $50.00 per booth (max 2 booths per vendor)

Total Enclosed $_______________ by Cashier’s Check, Money Order or Credit Card

Make checks payable to the Alvin Museum Society and mail the completed application & full payment to: Alvin Museum Society, P. O. Box 1902, Alvin, TX 77512

Hispanic Heritage Fiesta Event Committee reserves the exclusive right for approval of all items and the right to cancel a booth exhibit, require alteration and/or removal of any merchandise, product or activity from the show which we, in our sole discretion deem detrimental to or inconsistent with the quality of the event. Ranch Hand Festival will not be responsible for any vendor costs incurred if such an event occurs and no refund will be given. **Vendor is aware that if confirmed, there will be no refund.**

Booths will be assigned at the discretion of the Hispanic Heritage Fiesta Event Committee.

Sponsoring organizations shall not be liable to vendor for any damage, loss, or injury arising from any condition existent at the event, or any act, omission or neglect by any other vendor, volunteer, visitor or employee at any time, whether during, prior to or after the show.

I/We have read and agree to the rules of participation for the Hispanic Heritage Fiesta Event.

Vendor

Signature______________________________________________________Date______________

Texas Sales and Use Tax Permit #________________________________________________
INDEMNITY AGREEMENT, COVENANT NOT TO SUE and
LIABILITY RELEASE INDIVIDUAL RELEASE FOR ADULT

As a participant in Hispanic Heritage Fiesta, I acknowledge the risks, and assume personal responsibility for my actions. I hereby release, covenant not to sue and agree to indemnify and hold harmless the ALVIN HISTORICAL SOCIETY, its agents, employees, officers, and successors from any claim or liability, which I, my heirs, executors, administrators, or assigns may have or claim to have arising out of any bodily injury, death, or property damage I might sustain relating to activities while participating in Hispanic Heritage Fiesta. I understand that if I am a food vendor, there are potential risks involved in cooking and/or serving my food item which include, but are not limited to, burns, cuts, slipping, falling or lifting heavy items that are actually heavier than they appear. I have read this Indemnity Agreement, Covenant Not to Sue and Liability Release and I understand all its terms. I sign it voluntarily and with full knowledge of its legal consequences.

Name of organization work site

Participant’s Signature & Complete Address Date

Printed Name and Telephone Number

INDIVIDUAL RELEASE FOR MINOR

In return for allowing my minor child to participate in Hispanic Heritage Fiesta, I acknowledge the risks, and assume responsibility for the actions of my minor child. I hereby release, covenant not to sue and agree to indemnify and hold harmless the ALVIN HISTORICAL SOCIETY, its agents, employees, officers and successors from any claim or liability, which I, my heirs, executors, administrators, or assigns may have or claim to have arising out of any bodily injury, death or property damage that our volunteer might sustain relating to activities while participating in this program. We have read the Indemnity Agreement, Covenant Not to Sue and Liability Release and understand all its terms. I sign it voluntarily and with full knowledge of its legal consequences.

Name of organization work site

Parent/Legal Guardian’s Signature & Complete Address Date

Printed Name of Minor and Telephone Number