



Winter Festival & Fiesta Navideña • Friday, December 2nd

Dear Potential Vendor:

Our 6th Annual Winter Festival & Fiesta Navideña will take place in beautiful downtown Cloverdale **Friday, December 2nd**. This Annual festival is promoted widely and offers both free admission and free parking to the public. We invite your business or organization to participate with us this year. In the case of food and beverages, we allow limited, if any, duplication of vendors on a first come basis, and Cloverdale Chamber of Commerce members will be given first consideration.

VENDOR APPLICATION

PLEASE NOTE THE FOLLOWING: Vending hours are 4:30 to 8pm. No Plaza Locations available. No early departures accepted. Vendor acceptance is at the sole discretion of the Cloverdale Chamber of Commerce. Cloverdale Chamber will have a hard alcohol booth – no other booths offering hard alcohol will be permitted. **All entries are final. No Refunds. No Heating is allowed under the tents.**

Space for an 8ft Table under a Tent

_____ **\$40** Retail Vendor
**\$20 for Non-Profits*

10 by 10 space under a Tent

_____ **\$50** Food and Wine Vendor

Contact: _____

Company: _____

Address: _____

E-Mail
Address: _____

Phone: _____

Product Description:

REQUIRED ATTACHMENTS:

Please attach a photocopy of your CA Seller’s Permit AND/OR CA Resale License AND/OR CA Board of Health Permit to this application.

In consideration of the acceptance of the right to participate, vendors, by execution of this entry form release and discharge the Cloverdale Chamber of Commerce, and the City of Cloverdale, and their officers, directors, and representatives and anyone else connected with management from any and all known or unknown damages, injuries, losses, judgments, and/or claims from any cause whatsoever that may be suffered by any vendor to his person or property. Further, each vendor expressly agrees to indemnify all of the foregoing entities, firms, persons and bodies of and from any and all liability occasioned or resulting from the conduct of other vendors or attendees.

Signature of Vendor _____ **Date:** _____

Make checks payable to Cloverdale Chamber of Commerce, and mail to the following:
Cloverdale Chamber of Commerce • 126 N. Cloverdale Blvd., Cloverdale, CA 95425
(707) 894-4470 • E-Mail: info@cloverdalechamber.com

