



BIG STING COUNTRY MUSIC FESTIVAL

Thank you for your interest as a **Food/Merchant** Vendor at the 2024 Big Sting Country Music Festival hosted by The Shadows Foundation on Friday Oct. 11th – Saturday Oct. 12th 2024. For further questions/concerns Please email jesse@shadowsfoundation.com or vicki@shadowsfoundation.com.

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

Terms & Conditions: Incomplete applications will **NOT** be accepted. We do not want duplicate trucks/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 Big Sting Application: Food OR Merchant Vendor.
- Yavapai County Health Permit (**If Applicable**).
- Certificate of Insurance (2 copies) One Listing Shadows Foundation and One listing the City of Prescott.
- Copy of Arizona Tax Permit.
- Copy of last fire inspection (if hoods are present and applicable). Copy of last fire inspection (if hoods are present).
- Booth Site Plan and/or Pictures.

EVENT LOCATION: 3101 Watson Lake Park Rd, Prescott, AZ 86301

ONCE ACCEPTED PAYMENT WILL BE REQUIRED AND PROCESSED:

ENTRY FEE:

FOOD VENDORS: \$400 to participate

MERCHANT VENDORS: \$200 to participate

SECURITY DEPOSIT: \$100 refundable security deposit is required if accepted. Your 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 unless otherwise given permission to close early.
- (3) Leave your area clean of all boxes, trash, grease stains, etc.
- (4) Dispose of all trash in the trash dumpsters.
- (5) Accept one form of credit/debit card payment.

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PAYMENT:

Check(s): Please submit your vendor/merchant fee and security deposit made payable to:

Shadows Foundation

P.O. Box 3026, Flagstaff, AZ 86003

PLEASE PROVIDE 2 SEPARATE CHECKS WITH YOUR COMPLETED VENDOR APPLICATION. THERE SHOULD BE ONE CHECK FOR YOUR SECURITY DEPOSIT AND ONE FOR YOUR VENDOR FEE.

*******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 illness.***

SODA/WATER PRODUCT: ALL FOOD VENDORS WILL BE REQUIRED TO SELL COKE PRODUCTS ONLY AT THEIR FOOD TRUCKS. This event is sponsored by Swire Coca Cola so we require that if you are selling water/soda you sell COKE PRODUCTS ONLY. For your convenience we will have coke products available to purchase throughout the event if needed. **THANK YOU!**

MEAL DONATION: We are asking each of our food vendors to assist us in **donating 3 meals so that we can feed our volunteers.** They will be given a meal voucher with your name on it and will need to give it to you to redeem. Should you need to create a meal to fit this cost please do. We would just ask you to let us know so that we can make it clear to the volunteers that would be using their meal ticket at your food truck. Thank you!

SET UP & HOURS: Thursday Oct 10th & Friday October 11th. Arrival and set up will be arranged in advance with vendors. **All Food Vendors must be set up and in their assigned spot by 10am Friday. All Merchant Vendors** must be set up and in their place by 11am Friday morning. Tear-down is 7:00am Sunday Oct. 13th unless arrangement has been made to depart on Saturday evening Oct. 12th after ALL attendees have left concert arena. Visit us online to view full list of regulations.

Due to congestion at the facility, we will be having designated arrival times to allow for the easiest arrival and placement for everyone!

PLEASE SPECIFY BELOW THE SIZE OF YOUR VEHICLE AND IF IT IS BEING TOWED.

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ELECTRICITY/WATER: We recommend bringing your own generators, if possible, but generators and power boxes will be available **IF** power is needed, however there is a



\$50/day gas charge. Plugs needed are . Water would need to be provided by you the vendor. Potable water is not available at the event. Generators must meet guidelines. Please supply a brief description of your generator below.

ICE: Ice bags will be available for purchase for \$5 per 20lb bag.

SEWER HOOKUPS: There will not be any sewer hookups, and **NO DUMPING** is permitted throughout the duration of the event.

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

INSURANCE: Please provide a Certificate of Insurance naming the below additionally insured for a minimum of \$1 million liability. PLEASE provide 2 separate certificates. Each certificate will have one of two names listed below:

- City of Prescott
- Shadows Foundation

SECURITY: Security will be provided.

CANCELLATION: ALL cancellations must be made in writing no later than **September 13th**. A 100% refund will be given if proper notification is received 30 days PRIOR to the event.

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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 “BIG STING COUNTRY MUSIC FESTIVAL 2024”. 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:

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VENDOR INFORMATION:

VENDOR NAME: _____

Owner Name _____

Address _____ - _____

City _____ State _____ Zip _____

E-Mail Address _____

Contact Phone Number: _____

State TPT (transaction privilege tax) Number: _____

City of Prescott Business License/Tax Number: _____

Yavapai County Health Permit Number (If Applicable) _____

Describe your menu/merchandise below. Please be specific on the products you are selling. We want you to be profitable and are looking for a variety of food and items!

VENDOR BOOTH SIZE: Below please draw a basic photo and indicate size of truck or trailer with any opened awnings and hitches.

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FOOD VENDORS ONLY:

- \$400/For Food Vendor Only

Each Food Vendor will receive (4) vendor passes for their staff and (1) weekend parking pass for (1) vehicle. Additional parking passes may be purchased if needed for **\$10**.

Please inquire should you have questions regarding the size of your truck/trailer and additional questions you might have regarding water on premises etc. If pop-up tents are being used, **they must be weighted down**. You **CAN NOT** stake down your tents into the grass areas. **NO EXCEPTIONS!**

Will you be putting up a shade tent? Yes ___ No ___ Size of tent _____? Is this included in your vendor booth size description or in addition? _____

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

HEALTH DEPARTMENT:

All food vendors must complete a Yavapai County Food Application Packet. This must be submitted to the **Yavapai County Community Health Services AT LEAST 6 WEEKS prior to Event Date of October 11th, 2024**. You must provide a copy to Shadows Foundation 4 weeks prior to the event date (**no later than FRIDAY SEPTEMBER 13th**). If a packet is needed, please inquire and one will be sent to you or you may obtain one at <http://www.yavapai.us/chs/Forms/category/special-events-1>

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ALL APPLICATIONS MUST BE TURNED IN NO LATER THAN MONDAY SEPT 9th.

ONCE YOUR APPLICATION HAS BEEN ACCEPTED WITH ALL THE REQUIRED PAPERWORK, WE WILL THEN REQUIRE PAYMENT TO SECURE YOUR SPOT.

MERCHANT VENDORS ONLY:

- \$200/ Merchant Booth Only

Each Merchant Vendor will receive (4) Vendor passes for their staff and (1) weekend parking pass for (1) vehicle. Additional parking passes may be purchased if needed for **\$10**.

10' wide by 10' deep tented vendor spots. Vendors, please inquire regarding the size of your truck/trailer if being used. If pop-up tents are being used, **they must be weighted down**. You **CAN NOT** stake down your tents into the grass areas. **NO EXCEPTIONS!**

No obscene or offensive items will be sold or displayed. The items sold by any vendor must pass strict family-oriented scrutiny. No items with logos that express sexual innuendo, present defamatory statements or obscenity will be permitted. If such items are put on display, the Chairman or Director reserves the right to request their removal.

The Shadows Foundation holds all rights to the trademark of the "**BIG STING**" and **CANNOT** be used by the vendor. Vendor shall not represent or infer that any product is sanctioned by the "**BIG STING**".

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Health Department COVID Restrictions

By initialing below and registering for Shadows Foundation's event, I acknowledge that I agree to abide by the CURRENT 2024 YAVAPAI AND CDC COVID-19 SAFETY GUIDELINES. 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.

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SUBMISSION OF VENDOR APPLICATIONS:

Email to Jesse@shadowsfoundation.com.

ACCEPTED FOOD/MERCHANT VENDORS:

ALL ACCEPTED VENDORS WILL BE REQUIRED TO MAIL APPLICATION WITH VENDOR FEE, SECURITY DEPOSIT AND ALL OTHER REQUIRED PAPERWORK TO:

Shadows Foundation

Attn: Vicki Burton

P.O. Box 3026

Flagstaff, AZ 86003

NOTE: Completed Application can also be emailed to jesse@shadowsfoundation.com.

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. By signing this contract, the vendor listed above agrees to be at Watson Lake, set up on Friday October 11th by their designated time and will not begin tear down until Sunday October 13th at 7:00am (UNLESS APPROVED). Vendor is responsible for securing goods at night. Vendor hereby agrees to indemnify and hold harmless The Shadows Foundation (The Big Sting) against any damages or claims that may arise in connection with vendor's presence at the event and vendor's activities of any kind.

VENDOR/BUSINESS:

BUSINESS NAME: _____

CONTACT NAME: (Print) _____ Date _____

SIGNATURE: _____

We look forward to seeing you! Date Registration Received _____

KEEP A COPY OF THIS FORM FOR YOUR INFORMATION