

Gloamin' Fest
August 29th, 2009
10am – 6pm Rain or Shine
St. Laurence Episcopal Church
26812 Barkley Rd
Conifer, CO 80433

Vendor Information & Guidelines

Please mail your application to the address below, along with a copy of:

- proof of liability insurance
- sales tax/use permits
- current kitchen certification (food processors only)
- check for \$75 made out to WayGood Productions

Mountain Girl Organics
26042 Fern Gulch Rd
Evergreen, CO 80439
Attn: Valynne

Fee:

The fee is \$75 per 10'x10' space per vendor. If you need a space larger than this, please let Valynne know ASAP.

Deadline:

Applications must be postmarked by May 26, 2009. Valynne will contact you via e-mail or phone with your application status no later than June 8, 2009. We reserve the right to refuse any applicants.

Schedule:

Space set up begins at 8am. We will have until 8pm to break down and vacate the premises. Please commit to be there for the entire time (it will be difficult to drive through the crowd earlier before the show ends).

Safety & Security:

Please do not leave your booth unattended. If you bring small children, keep them with you in your booth. Leave your pets at home. No smoking in or around your booth. Weights for your booth are mandatory. This market takes place on a parking lot - no spikes allowed. Food vendors; know and abide by the current health and safety guidelines.

Cleanup:

Vendors are responsible for cleaning up their own booth areas. Please make sure you leave your space as you found it. Vendors who do not clean up after themselves will not be invited back.

Weather: This is an outdoor market that is held rain or shine, so be sure to plan accordingly. This is a lovely spot; however the wind has been known to kick up so please keep that in mind while setting up.

Electricity: Electricity will not be provided at this location. Quiet generators are allowed.

Tickets: Each vendor will be given 2 tickets to share with friends. Thank you for joining us – this year will be bigger and better than ever!

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Vendor Application

Contact Name _____

Business Name _____

Address _____

City _____

State _____

Zip Code _____

Phone _____

E-mail _____

Website _____

Preferred Contact Method:

E-mail Phone Mail

Please describe your product: _____

I agree to abide by all of the guidelines, and defend, indemnify, and hold harmless from any and all loss, cost, or expense Way Good West and St. Laurence Episcopal employees, or representatives, in connection with such vendor activity. Way Good West and St. Laurence Episcopal reserve the right to remove any vendor from the market at any time.

Signature _____ Date _____

* Please direct any questions to Valynne@MountainGirlOrganics.com or call (303) 903-7821