



City of Lynn Haven

Event Date: October 31, 2018 Sports Complex 5 pm – 8 pm

Halloween Carnival Game Booth Application

Application deadline: Wednesday, October 24th 2018 at 4:30 p.m.

Applicant Information

Name: _____
Last *First* *Organization/Company Name*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Phone Number: _____ Alt. Phone Number: _____

Email Address: _____
You will be contacted by the email address provided regarding your application status.

Important Information

Please bring your own set up equipment (tables, chairs, canopies electricity, etc.) Set-up begins at 3:00 P.M. unless other arrangements have been made with the City of Lynn Haven staff. All vehicles must be unloaded and removed from the interior of the park by 4:30 P.M

What type of game are you bringing? _____

Check one:

- I wish to pay \$60.00 for a candy or prizes to be provided
- I will provide \$60.00 of candy or prizes

What type of prizes or candy will you be bringing? _____

We accept cash, check, and all major credit cards except AMEX. (\$3 surcharge to run credit cards.)

Vendor Booth Size:

- 12 x 12 ft.
- 24 x 12 ft.

There will NOT be any electricity provided at the event. You will need to provide your own source of electricity if needed. Please sign to acknowledge your understanding. X_____

You can scan and email your application to communications@cityoflynnhaven.com, drop it off at City Hall, or mail it to: City of Lynn Haven, Attn: Communications/Special Events, 825 Ohio Avenue, Lynn Haven, FL 32444.

How did you hear about this Event?

- | | | |
|--------------------------------------|-----------------------------------|---|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Facebook | <input type="checkbox"/> Friends/Family |
| <input type="checkbox"/> Radio | <input type="checkbox"/> Twitter | <input type="checkbox"/> City Website |
| <input type="checkbox"/> Other _____ | | |

Please initial each line:

1. ____ Completed application and payment is due by October 24th, 2018 at 4:30 p.m.
2. ____ You will receive a confirmation email or phone call when your application has been received. **If you do not get a call or email within a week of submitting your application please follow up to be sure we have received it.** If you show up the day of the event and we have not received your application you will not be able to participate. It is your responsibility to make sure the application has been received.
3. ____ There will be no special requests for location of your booth space unless you have a medical or health condition.
4. ____ Please **do not** show up before the arrival time given on the day of the event. Your event space will not be marked until this arrival time and you will be asked to wait until this time. If for some reason, you need more time than the allotted set up time, please speak with the Marketing and Communication Specialist at least two days in advance. Also please do not just choose an unmarked space and start setting up, you will be asked to move to your correct space.
5. ____ **Rain Policy:** We will only grant refunds if applicable when the event is a **complete rain-out** and is defined as imminent weather causing the event to be canceled by the **City of Lynn Haven**. If this occurs, a City of Lynn Haven staff member will notify you on the day of the event.
6. ____ Booths are expected to remain open during official event hours. Closing early negatively affects your neighbors and the entire venue. If for some reason you **must** leave before the event is over, you must **walk** your merchandise from the area.
7. ____ You are responsible for providing your own equipment for set up and equipment to run during the event (tables, chairs, canopies, electricity, water, etc.)
8. ____ Please be prepared to **secure your pop-up tent and/or set up items** in case of windy or inclement weather.
9. ____ You will be assigned a time and space to set up for the event. If you do not show up on time, you will lose your space. No refund will be issued.
10. ____ Please make checks payable to: City of Lynn Haven. To mail vendor form, please mail to: City of Lynn Haven, Attn: Communications/Special Events, 825 Ohio Avenue, Lynn Haven, FL 32444.

For additional information, please contact the Event/Communications staff at 850-265-2121, Monday–Friday 7:30 a.m. – 4:30 p.m. or Communications@cityoflynnhaven.com.

HOLD HARMLESS, INDEMNIFICATION AND INSURANCE

The vendor agrees that he/she will indemnify and save harmless the City of Lynn Haven and all employees from any and all liability claims, damages, losses, expenses (including attorney's fee), proceedings and agrees that he/she will, at his/her own expense, defend and all actions, suits or proceedings which may be brought against the City in connection with the vendor. The vendor agrees that he/she will satisfy, pay and discharge any and all judgments that may be entered against the City in any such action or proceeding.

Vendor Signature:

PRINT NAME:

DATE:

