

2024

Fairburn Fall Festival & Parade

Vendor Application

Food, Arts & Craft, Information Vendors



Fairburn Fall Festival

October 5, 2024

9:00 AM – 3:00 PM

Downtown Fairburn

(770) 964-2244 ext. 133

Submit all vendor applications via mail, in-person or email. Emailed applications will not be processed without payment.

Address: 149 S.W. Broad Street, Fairburn, GA 30213

ATTN: Chapin Scott: Cscott@fairburn.com

Vendor Information:

Vendor Name: _____

Contact Name: _____ Cell Phone: _____

Address: _____

E-Mail Address: _____

Website: _____

Vendor Category (check all that apply)

- Community Information
- Food
- Beverages
- Other _____
- Handmade Art, Clothing or Crafts
- Health & Beauty
- Jewelry

Fees: (per 10x10 space)

Food & Beverage Vendors	\$ 225.00
Food Trucks	\$ 275.00
Alcohol Vendors	\$ 325.00
Art & Craft Vendors	\$ 175.00
Community Information	\$ 25.00

Non-Profit Fees/ Community Organizations: (per 10x10 space)

Non-Profit Food & Beverage Vendors	\$ 175.00
Non-Profit Art & Craft Vendors	\$ 125.00
Community Information	\$ 25.00

Each application must include a cashier's check or money order payable to the **City of Fairburn**. Vendors may fill out a Credit Card Authorization Form for credit card payments.

Type of product? (Check all that apply)

_____ Pre-packaged Food _____ Bottled/canned Soft Drinks _____ Food Prepared on-site

Product Description: _____

NUMBER OF BOOTHS REQUESTED _____

Will you utilize any of the following on-site, during the event? (Check all that apply)

- _____ Electricity
- _____ Refrigeration
- _____ Grill: Gas _____ Charcoal _____ Other (specify) _____
- _____ Microwave Oven
- _____ Fryer

Rules & Regulations Agreement

Vendor Regulations, Setup, and Parking Procedures.

- All vendors must provide their own tables, skirted table skirts, chairs, and trash bags.
- All vendors must have their own set-up materials. Staff are unable to assist with set-up or breakdown.
- Food Vendors must submit a detailed copy of your menu with the vendor application.
- All supplies/ materials must fit within your reserved 10 x10 space.
- Set- Up: Friday, October 4th – 6:00 PM – 10:00 PM / Saturday, October 5th: 6:00 AM – 10:00 AM
- We will have overnight security.
- Vehicles must be removed from the vendor area by 8:00AM
- All vendors must be set up by 10:00 AM.
- No music. We will have music and entertainment throughout the event.
- Vendors cannot break down until 3:00 PM
- This is a rain or shine event. No refunds will be given.
- All food vendors participating must have at least \$1,000,000 of liability insurance for the event. Upon acceptance to the festival, you will be required to name The City of Fairburn as additional insured for the event. Certificate of Insurance reflecting these additions MUST be received no later than October 1, 2024. One day event insurance is permissible.
- All vendors are responsible to meet the requirements of the Fairburn Fire Department and the Fulton County Health Department including but not limited to proper fire extinguisher for your type of cooking (k) rated extinguishers are required for food vendors cooking with Grease.

I HAVE READ THE VENDOR RULES AND PROVIDED ACCURATE INFORMATION ON THE VENDOR

Signature _____

Date _____

Printed Name _____

Business Name _____

Submit all vendor applications via mail, in-person or email. Emailed applications will not be processed without payment.

Address: 149 S.W. Broad Street, Fairburn, GA 30213

ATTN: Chapin Scott: Cscott@fairburn.com

We appreciate your cooperation in following these rules and procedures for the safety of our vendors and guests, and the success of the festival.

(This form must be signed and returned with application)



CREDIT CARD AUTHORIZATION FORM

CARD HOLDER INFORMATION

Company Name:		Name on Card:	
Card Holder Billing Address:			
City:	State:	Zip:	
Telephone:		Email Address:	

PAYMENT AUTHORIZATION

Card Type: Visa Master Card American Express Discover

Card Number: _____ Expiration Date: _____ Verification Code (CVV/CVC): _____

I, _____ hereby authorize The City of Fairburn, Georgia to charge on my credit card the sum of \$ _____. Using this Credit Card Authorization Form, I agree that I will pay the listed amount and indemnify and understand that my signature on this form will serves as authorized signature on the credit card charge slip.

Card Holder Authorization Signature: _____ Date: _____

PAYMENT JUSTIFICATION

Payment Type: Utilities Taxes Business License Alcohol License Donations Other _____

Notes/Comments: _____

RELEASE OF LIABILITY AND WAIVER AGREEMENT

I, (print name) _____, AGREE TO THE FOLLOWING:

That I am over eighteen years of age, and that I have read and understood this Release of Liability and Waiver Agreement.

That I hereby waive, release and discharge from any and all claims or liabilities for death, personal injury, property damage, theft, or damages of any kind, whether or not attributable to the negligence of City of Fairburn and/or any agents, successors, assigns, or employees of City of Fairburn which may arise out of my use of the facilities of the City of Fairburn Parks and Recreation Department.

That I do hereby agree to indemnify and hold City of Fairburn and/or any agents, successors, assigns, or employees of City of Fairburn from and against any and all damages, losses, liabilities, obligations, penalties, claims, litigation, demands, defenses, judgements, suits, proceedings, costs, disbursements, or expenses of any kind or nature whatsoever (including, without limitation, attorney’s fees and experts fees and disbursement) which may at any time be imposed upon, incurred by or asserted or awarded against City of Fairburn and/or any agents, successors, assigns, or employees of City of Fairburn which relates to or in any way arises out of acts or omissions connected to my use of the facilities of the City of Fairburn Parks and Recreation Department, regardless of whether or not said acts or omissions were made by myself, my guests, or any vendors employed by myself in connection with my use of the facilities of the City of Fairburn Parks and Recreation Department.

Signature _____ Date _____

Printed Name _____ Business Name _____

INDEMNITY AGREEMENT

I, (print name) _____, AGREE TO THE FOLLOWING:

The use and reproduction of any and all photographs and/or video clips taken of me in any form whatsoever for use in the City of Fairburn Parks and Recreation newsletter, brochures, flyers, on the County and department websites, and in any other publications produced for the City of Fairburn Parks and Recreation Department.

The use of my name in any form whatsoever for use in the City of Fairburn Parks and Recreation newsletter, brochures, flyers, on the County and department websites, and in any other publications produced for the City of Fairburn Parks and Recreation Department.

I have read this document and am fully aware of the content and implications, legal and otherwise

Signature _____ Date _____

Printed Name _____ Business Name _____

Check List: Office Use Only

- _____ Completed and Signed copy of Application
- _____ Payment
- _____ 2 Photos - (1) of the craft/foods sold (final product presentation) (2) vendor setup/layout inside of booth
- _____ Signed copy of the Release of Liability and Waiver Agreement
- _____ Signed copy of the Indemnity Agreement
- _____ Certificate of liability insurance

Accepted _____ Yes _____ No _____ Electric _____ Yes _____ No _____ Booth Number _____

Items Approved:

Items Not Approved:

