



**CHINO CULTURAL PALOOZA 2020
INFORMATION/RETAIL VENDOR APPLICATION**

(Please print clearly or type)

Chino City Hall
13220 Central Avenue, Chino, CA 91710
Saturday, March 21, 2020
4:00–9:00 p.m.

OFFICE USE ONLY:

BOOTH #: _____

RECEIPT #: _____

Name of Organization/Company: _____ Email: _____

Full Name of Contact Person: _____ DOB: _____

Address: _____ City: _____ Zip: _____

Day: () _____ Cell: () _____ Cell Phone Provider: _____

Emergency Contact: _____ Phone: () _____ Relationship: _____

PARTICIPANT INFORMATION (PLEASE CHECK ALL THAT APPLY)

____ NON-PROFIT VENDOR INFORMATION FEE: \$13 ► NON-PROFIT: # _____

____ *COMMERCIAL VENDOR INFORMATION FEE: \$35

____ NON-PROFIT RETAIL VENDOR FEE: \$41

____ *COMMERCIAL RETAIL VENDOR FEE: \$60

**Commercial = Operating a business for profit*

NOTICE: PLEASE BE AWARE OF THE FOLLOWING:

PLEASE INITIAL YOU HAVE READ THESE ITEMS: _____

- IF THE EVENT IS CANCELLED DUE TO SEVERE WEATHER, A FULL REFUND WILL BE ISSUED FOR THE BOOTH FEE. **BUSINESS LICENSING DOES NOT PROVIDE REFUNDS.**
- VENDOR/APPLICANT MUST BE PRESENT FOR THE DURATION OF THE EVENT.
- THE CITY OF CHINO WILL NOT MONITOR NOR GUARANTEE EXCLUSIVITY OF MERCHANDISE SALES.
- **NO REFUNDS ON CANCELLATIONS AFTER FRIDAY, MARCH 6, 2020.**

EVENT REQUIREMENTS

- Completed application form and payment submitted.
- Signed City of Chino hold harmless/waiver form.
- Current City of Chino business license. **BUSINESS LICENSE #** _____
 - Businesses located outside the City of Chino (who do not have a City of Chino Business License) are required to obtain a "one day" Vendor Permit.
 - One-day permits are \$13. Additional fees may be required by the City of Chino Finance Department, Business Licensing, 909.334.3263.
- **Seller's Permit from the State of California Board of Equalization:**
 - I hold a valid City of Chino seller's permit. My number is: **S** _____
 - My sales are exempt occasional sales, less than three times per year. *Your information will be submitted to the State of California for confirmation.*

For more information, contact the State Board of Equalization, Riverside Field Office:
3737 Main Street, Suite #1000, Riverside, CA 92501; 951.680.6400 or www.boe.ca.gov.

GENERAL BOOTH INFORMATION

- Booth set-up begins at **2:30 p.m.** Please have booth ready by **3:30 p.m.**
- A 10'x10' space will be provided for participants. Applicant is responsible for tables, chairs, shade, etc.
- **All vendors must bring weights to secure EZ-UP's** _____ (initials)
- Electricity will not be provided. **NO GENERATORS ARE ALLOWED.**
- All applications are subject to approval, and booth spaces will be assigned to vendors. Applications will be accepted on a first-come, first-served basis or until full.

PAYEE INFORMATION (if paying with check or credit card and if different than contact person at top of form)

Name Listed on Check or Credit Card: _____ Primary Phone:() _____

Address: _____ City: _____ Zip Code: _____

Emergency Contact: _____ Phone:() _____ Relationship: _____ DOB: _____

APPLICATION SUBMISSION-APPLICATIONS MUST BE SUBMITTED IN PERSON

Complete applications will be accepted ONLY through Friday, March 6, 2020 (or until spots are filled).

Submit complete applications with proper payment to:

City of Chino, Carolyn Owens Community Center, 13201 Central Avenue, Chino, 91710

Make check/money order payable to: City of Chino

For more information or special requests/considerations, please contact:

Kari Franco, Community Services Coordinator, at 909.334.3537 or kfranco@cityofchino.org.

-Please turn over for more information-

VENDOR APPLICATION

(Please print clearly or type)

*** WAIVER AND RELEASE BY APPLICANT(S)
FOR PARTICIPATION IN A CITY OF CHINO SPONSORED PROGRAM AND/OR
USE OF A CITY OF CHINO FACILITY**

Participant Name: _____ Activity: Cultural Palooza

Program Dates: From: March 21, 2020 To: March 21, 2020

In exchange for being permitted to participate in any City of Chino activity and/or use any City of Chino facility, I acknowledge and attest to the fact that:

1. My participation, and/or that of my child/children/guardians, is voluntary.
2. My participation, and/or that of my child/children/guardians, may result in injury, death, property damage, and other losses, and I assume all of those risks.
3. I am legally competent to understand and accept the associated risks.
4. I waive, and release the City, its officials, employees, and volunteers from, all claims for any injury, death, property damage, or other loss resulting from my participation in the activity, and/or that of my child/children/guardians.
5. I am responsible for payment of all fees for, and liabilities and damages resulting from, my participation in the activity and/or that of my child/children/guardians, including damages to City property, injury to other participants, or other losses of any kind.
6. I will defend the City and its representatives against any claims or lawsuits that are a result of my willful misconduct, and/or that of my child/children/guardians.
7. I agree that the City can take photographs and/or film me, and my child/children/guardians, while participating in a City activity and/or at a City facility to be used for promotional purposes; and, further that such photographs and film will be the sole property of the City and that neither I nor my child/children/guardians will be entitled to any license fee or royalty for the City's use thereof.
8. I understand that rates, fees, dates, times, classes, schedule of classes, and instructors established by the City may change at any time without notice.
9. I agree that City fliers and class schedules are not an expressed and implied contract.
10. I agree that the City is not responsible for any damage or loss that may arise from a misunderstanding, error, or omission related to the activity.
11. I understand that the City reserves the right to change or cancel any or all of the participation/use of rules at any time.
12. I understand that any individual behaving inappropriately or unsafely will be ejected and denied future participation.

I am signing a full release of any and all liability against the City of Chino and do so of my own free will.

Printed Name: _____ Parent/Guardian

Signature: _____ Date: _____

Address: _____

Phone (day): _____ Phone (evening): _____ Phone (cell): _____

Organization (if any): _____

***** **FOR OFFICE USE ONLY** *****

Staff member printed name: _____ Title: _____

Staff member signature: _____ Date: _____

*** To be completed by each adult (18 years of age or older)**

CS Standard waiver/Approved March 2019

Description of booth activity:
