

**SANTA BARBARA FAIR & EXPO
2019 FOOD CONCESSION APPLICATION
FAIR DATES: APRIL 24 – 28, 2019**

RETURNING VENDOR _____ NEW VENDOR _____

This application does not guarantee rental space. Application must be completed before consideration will be given. **New Vendors: As part of the application process, a photograph of the booth (with the product(s) must be submitted with the application.** Please include a brochure and any other information about your product and booth.

PLEASE PRINT CLEARLY OR TYPE APPLICATION

Business Name: _____

Owner/Contact: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ e-mail: _____ + _____

How Long in Business: _____

Liability insurance: vendor must provide a certificate of liability insurance naming Earl Warren Showgrounds as additional insurance or insurance may be purchased for \$130.00 from CFSA

MANDATORY FOR VENDORS SELLING OR TAKING ORDERS FOR MERCHANDISE:

California State Sales Tax Permit Number: _____

List items/products you will sell and the selling prices or Attach a menu with all items and prices listed.

Note: Special approval is required for the following: Use of microphone or PA system, drawings or prize giveaways, fliers or bumper stickers and food samples. NO BALLOONS CAN BE SOLD OR GIVEN AWAY.

REFERENCES: (for new vendors only)

List any other Fairs, Festivals or events and their respective dates you have participated in:

Management assigns all booth spaces. Please provide the following to assist us in meeting your requests.

SPACE SIZE:

Is your booth a self-contained trailer? _____ If yes what size? _____

What is the total space needed for your trailer and prep area? _____

Side or end serve? _____

ELECTRICAL REQUIREMENTS:

Indicate your electrical needs:

_____ Voltage _____ Amps _____ Phase

List items you need power for (include fans, lights, calculators, etc

OTHER REQUIREMENTS

List any "special" space requirements you may have:

Do you require stock truck parking? _____ Electrical Needs: _____

Space needed: _____

I certify all of the information contained in this application to be true and accurate to the best of my knowledge.

Signature

Date

MANDATORY - Social Security or Federal ID# _____

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RETURN APPLICATION TO:

**ROSIE MIRANDA
EVENT COORDINATOR
SANTA BARBARA FAIR & EXPO
3400 Calle Real
SANTA BARBARA, CA 93105 OR E-Mail**

OR

E-Mail to;
Rosie@earlwarren.com