

FOOD VENDOR INFORMATION

HIGHLAND AREA ARTS COUNCIL- ART IN THE PARK 2019

Thank you for your interest in **Art in the Park 2019** at Lindendale Park, Highland, Illinois.
The following information will assist you in registration and set up:

1. **REGISTER:**

- Please fill out the attached form stating your intention to participate. Mail or fax back.
- Registration must be received **by September 11, 2019**.
- Please enclose your booth fee with your registration.
- Registration is **on a first come, first served basis** with a limited amount of space available.
- Your participation in the event and food/drink offerings (to avoid duplication) will be confirmed by HAAC on or before September 11, 2019.

Is your organization a nonprofit? YES _____ NO _____

2. **DATES & HOURS OF OPERATION:**

The hours for **Art in the Park 2019** are: Saturday, October 12 10 am – 5 pm
Sunday, October 13 11 am – 4 pm

Please plan to be there both days for the duration of the show.

3. **Space Fee: \$ 25.00 per space** (as dictated by size required) spaces will be assigned by HAAC.

4. **DONATION AFTER THE EVENT:** The vendor agrees to pay the Highland Area Arts Council 10% of your gross receipts over \$200. This payment should be sent to:

**Highland Area Arts Council, PO Box 33, Highland, IL 62249
PLEASE, No later than October 20, 2018**

5. **BOOTH SET UP:** *If you have a truck, plan to set up on Thursday, October 10, 2019*
Thursday, October 10, 12 pm – 5 pm or
Friday, October 11, 8 am – 12 pm, unless other arrangements are made.

6. **POWER, TABLES & SIGNAGE:** We will provide power (120V) for your booth. You must provide heavy-duty extension cords (100 feet), serving tables, chairs for your workers and signs that announce your menu and the cost of each item. Picnic tables will be available for your patrons to sit and enjoy your food. Please send a note with all of the electrical needs and anything else you need to run your booth.

7. **HELVETIA SHARP SHOOTERS SOCIETY, INC.** (who owns the park) **will sell all soda, water, coffee, beer and wine. Please do not plan to sell these beverages.**

8. **SECURITY:** Security is provided free of charge for Friday and Saturday evenings.

9. **COUNTY HEALTH DEPARTMENT CERTIFICATION:** Included with this mailing is a form and information from the County Health Department. You need to **fill out the form and send it to the County Health Department no later than September 2, 2019** even if you are already registered with them. **Existing Restaurants still need to send in an application to be certified for this event.**

We look forward to seeing you!
Please feel free to contact us with any questions or concerns.
Marlene Scholl and Janet Nicolaides, co-chairs
For questions, contact Marlene Scholl at 618-660-7070

Thank you for your participation!

The Highland Area Arts Council is looking forward to another successful Art in the Park!

PLEASE RETURN by September 11, 2019
To: Marlene Scholl, 1518 Pine, Highland, IL 62249

Highland Arts Council, PO Box 33, Highland, IL 62249
www.highlandartscouncil.org lynette@highlandartscouncil.org 618-558-0054



Applications will not be accepted after this date.

2019 Food Vendor Application

To: **Marlene Scholl and Janet Nicolaides**
Food Vendor Co-Chairs

I hereby agree to be a vendor at **Art in the Park 2019**, October 12 and 13 at Lindendale Park, Highland Illinois sponsored by the **Highland Area Arts Council**. Please list your desired food/drink menu and pricing for each item. To avoid duplication of menu items by food vendors, **HAAC** reserves the right to confirm each food vendor's menu items.

List food items you would like to sell: _____

I hereby forever discharge, release and hold harmless the City of Highland, The Highland Area Arts Council and Helvetia Sharpshooters Society, Inc. and their agents from any and all responsibility, liability, loss, claims or damage whatsoever arising from or in connection with Art in the Park, and hereby consent to all rules of the festival as set out in this announcement and forthcoming instructions.

Vendor Name

Address

Phone

Email Address

Signature

Date

***Amount of Space Requested: _____

***Electrical Needs: _____

OFFICE ONLY:

\$ 25.00 Booth / Space Fee Enclosed _____

Check # _____

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