



PARTICIPANT APPLICATION

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Company Name: Taste of Grand Island
Address: PO BOX 262, Grand Island, NY 14072
Legal Form: Taste of Grand Island
Phone: (716) 341-1040

Event Information

Event:	Taste of Grand Island
Date:	September 27, 2014
Venue:	Grand Island Blvd and Town Commons
Crowd:	4,000 – 5,000
Festival duration:	12:00 PM – 8:00 PM
Deadline:	August 15, 2014

Ticket Sales

Tickets will be sold at the entrances to the festival in increments of one dollar. Vendors will take tickets as compensation during the festival and cash in their collected tickets following the event.

Activity and Participators

The Taste of Grand Island will feature over 25 restaurants from Grand Island. A wide variety of cuisine will be offered as well as exhibits for over 30 island businesses. Many businesses from Grand Island will also be present to offer and showcase their products and services. The event will be a taste of everything that is Grand Island.

Target audiences

- Grand Island
- Western New York
- Southern Ontario

APPLICATION PROCESS: Applicants are accepted until the events are full. This is the application, it does not guarantee acceptance. You will be notified of your status within 7 days of us receiving the completed application. We will not process your fees unless you have been accepted. Once accepted, we will deposit your fees, you will receive an acceptance letter with any applicable health & fire permit applications for each event, then 20-30 days prior to the event you will receive your participant packet with all your set up information providing we have received your insurance & completed permit applications.

PAYMENT: We will not accept any applications without payment. Upon acceptance to festival payments will be processed. Preferred form of payment is by check or money order. A \$50 charge will be assessed for bounced checks- no exceptions. A separate \$50 refundable cleaning deposit is required for all vendors to participate.

REFUND POLICY: If the withdraw is made 60 days or more prior to the day of the event, you can receive a 50% refund on your festival fee; if it is made 59 days or less from the first day of the event, no refunds are available as all funds are committed to the production, promotion, marketing & advertising of the Festival. All refund requests must be made in writing & received by the festival director by email or mail. Please site reason for withdraw.

WHAT WE PROVIDE: Included in your application fee for each festival, unless otherwise stated, is a 10ft x 10ft space. You provide everything else for your set up. The Taste of Grand Island may assist in acquiring any equipment needed. Electricity is limited and available at cost. (\$25 per unit)

Required items: All vendors are required to have a minimum size 10x10ft tent. Larger tents are applicable to an additional fee. This event will continue after dusk and as a result all vendors must have lighting in their exhibits. Recommendations: white rope lights or what string lights.

Merchants are provided with the following:

One 10' x 10' space

Convenient vehicle drive in for setup and take down

Roaming event security

Signage for tent

Access to portable water

Payment information: (Please make checks payable to the Taste of Grand Island)

Booth fee is \$100.00 for each 10' x 10' space) and required clean up deposit of \$50.00

Please submit one check for the booth fee of \$100.00 and a separate check in the amount of \$50.00 for the required clean up deposit. The deposit check will be returned to vendors after the Taste of Grand Island, if regulations are met and space is left as it was prior to the event.

Payment in FULL must accompany your application. A \$50 service fee will be charge for returned checks of accepted vendors. Applications will not be accepted without payment.

Payment will be returned to applicants who are not accepted.

PATRICIPANT APPLICATION

Please fill out both sides of this application & return

Company Name _____ Contact Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Email _____ Website _____

Payment Method (please select one):

1. Check #'s:
2. Cash

MENU CATEGORY (please select one):

Jewelry Apparel Art work Hair salon Insurance
Other (description) _____

I agree to abide by the rules stated. I understand that all promotion of my items must take place within the confines of my booth. I further understand that the Town of Grand Island and the Taste of Grand Island and all of their representatives are not responsible for or liable for damages including, but not limited to, loss suffered before, during, or after each event I have applied to as a result of the display of my work, equipment or material. I understand that there are no refunds or rain checks due to inclement weather. If these guidelines are not upheld, my booth will be closed immediately and my funds will not be refunded.

Print Name _____ Signature _____

Date _____

Attach this application and compete and mail checks (payable to the Taste of Grand Island):

Taste of Grand Island
P.O. BOX 262
Grand Island, NY 14072

Questions: Contact Corey McGowan at 716-341-1040 or email at corey.mcgowan89@gmail.com



***Rentals are only if you do not own or cannot obtain equipment on your own.**

FEE SCHEDULE	PRICE	CHECK BOX IF ITEM NEEDED
Event fee (Required)	\$100	
10 x 10 tent rental (if needed)	\$125	
HEALTH PERMIT (Required)	\$106	
TENT SIGNAGE (if needed)	\$45	
ELECTRICITY (If needed)	\$25 per unit	
6 FT TABLE rental (if needed)	\$10	
TABLE SKIRTING (if needed)	\$5	
CHAIR rental (if needed)	\$5	

Please enclose festival entry fee of \$100 along with this attachment. Please select any additional items that you will need. Checks can be mailed to the address below.

Taste of Grand Island

PO BOX 262

Grand Island, NY 14072