



36th Annual Art on the Beach Food Vendor Application 2019



Date: June 22 & 23, 2019
Time: Saturday 9AM to 5PM and Sunday 10AM to 4PM
Location: Oscoda Beach Park

Responsibility: Exhibitors must provide their own booth set-ups (tables & chairs). Electricity on premises is for local non-profit use only. Generators (quiet) will be necessary for vendors requiring power. There will be no private security on the premises. You are responsible for your own possessions during and after show hours. Water is not available onsite.

License Information: You will need to provide a Food Vendor License number specifying an Annual or Per Event License. You are expected to provide a Tax ID number and a copy of your liability insurance. These must be mailed along with your application and check or money order made out to O.A.C.C. To receive confirmation please enclose a S.A.S.E. An Email Confirmation will be sent to all applications that include an email address.

Weather: Postponements or cancellations of events due to weather conditions are beyond the control of the Oscoda-AuSable Chamber of Commerce. No refund for unused services, or allowance for the loss of enjoyment caused by weather conditions, will be made by the O.A.C.C. Exhibitor assumes all weather risks, as there will be NO refunds for rainouts or other weather conditions, acts of Nature or other occurrences that disrupt the event. All events purchased through us should be considered as "rain-or-shine" final purchases.

Applications must be received no later than June 7, 2019
Concession Fee: \$150.00 Non-Profit: 75.00 Non-Profit Members: \$25.00

Mail application, copy of liability insurance, and payment to: **Oscoda-AuSable Chamber of Commerce - 4440 N US-23, Oscoda, MI 48750**
For more information call: (989) 739-7322 Email: director@oscodachamber.com www.oscodachamber.com

AOB 2019

Food Vendor Application

Name: _____

Business Name: _____

Address: _____ email: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

License ID# _____ Trailer Size: _____

License Type: (Please check one) _____ Annual _____ Per Event

Food Menu Items & Prices: (please list all or attach copy of menu) _____

In consideration of your permitting me to participate in your event, on behalf of myself, my heirs, executors, administrators and assigns, I hereby waive and release any and all rights and claims for damages and/or injuries which I may incur, against O.A.C.C., the municipalities through which the event takes place, as well as any other person(s) connected to the event.

Signature: _____ Date: _____