

PLEASE PRINT

Business Name: _____

Contact: Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone: _____

Email _____

Product(s) to be sold: _____

TO PROTECT ALL VENDORS. WE RESERVE THE RIGHT TO REMOVE ANY VENDOR WHO DO NOT DECLARE ALL PRODUCTS SOLD AND APPROVED BY *Festa Siciliana*.

FOR *Festa Siciliana* USE ONLY

Receipt No. _____ Date Application Received _____

Note _____

Amount Received: \$ _____

Check No. _____



***FESTA
SICILIANA, Inc.***
*Proudly presents the 17th
Annual
Sicilian Festival*

**Sunday, May 23, 2010
10:00AM to 6:00PM**

The Sicilian Festival is held each year in the heart of Little Italy to celebrate the cultural heritage of San Diego's Sicilian American Community.

APPLICATION DEADLINE: Food Vendors and Merchants by May 1, 2010. Applications must be accompanied with a check or money order. Any application not complete can be disqualified.

APPLICATION PRIORITY: Space assignments and priority system based on deadline and time stamp and participation in past festivals.

SPACES: There will be no electricity provided.

HOURS/SCHEDULE: The festival hours are from 10:00AM to 6:00PM. Check-in time is 6:00AM to 8:30AM. Booth locations are assigned at check-in. Space forfeit if not occupied by 8:45AM.

PARKING: All vehicles must be removed from the festival area by 9:00AM. There is no vendor parking,

PERMITS AND CERTIFICATES: Food Vendors are responsible for San Diego County health permits. All permits must be posted within the booth. The Fire Marshall requires certified fire extinguishers in all food booths.

CONFIRMATIONS/REFUNDS: Confirmations will be mailed by May 1th, 2010. No refunds in case of inclement weather, acts of nature or restrictions by government agencies to cancel the event, over which the *Festa Siciliana* has no control, will be given. Cancellations received before April 1, 2010 are eligible for a refund with a \$25.00 processing fee.

DEADLINE FOR APPLICATION –May 1, 2010

APPLICATIONS MUST BE COMPLETELY FILLED IN!! Please include:

1. Completed Application
2. Copy of resale/seller's permit/health permit
3. Full Payment

Make payable to *Festa Siciliana* and mail application to:

**Bernadette Tarantino
8326 Adams St.
Lemon Grove, CA 91945**

Health Permit No. and Expiration Date: _____

State Franchise Seller's Permit No. _____

I agree to indemnify, defend, waive release and hold the FESTA SICILIANA from all liability, claims and causes of action for injuries to persons or property arising out of or related to this event. Specifically including, without limitations, injury or damage to booth contents, merchandise, employees, contractors, guests, customers, invitees and all other third parties.

Signature _____ Date: _____

SPACE RENTAL SCHEDULE

| | | |
|--|-------------------------|---------------|
| Non-Food Booth (Space Only) | 10x10 | 250.00 |
| Food (Space Only) | 10x10 | 600.00 |
| Food (Space Only) | 10x20 | 800.00 |
| Corporate Booth (Canopy Included) | 10X10 | 600.00 |
| Additional fee for a Canopy - | 150.00 per 10x10 | |

Telephone Inquiries:

**Bernadette Tarantino (*Festa Siciliana* Vending Chairman)
tel: 619-469-2206; fax: 619-741-2206**