

Walpole Day 2018

Vendor Application Packet

May 12th, 2018

This packet must be completed and submitted with the appropriate vendor fee by April 13, 2018.

Event Information:

Location: Stone Field @ Blackburn Hall
135 School Street
Walpole, MA 02081



Agenda:

- One Day Festival - Saturday, May 12th
- 11:00am - 3:00pm
- Activities Include:
 - Parade
 - Live Musical Entertainment
 - Kidz Zone
 - Police, Fire, and Army Vehicles
 - Vendor Booths
 - Food Court
 - Demonstrations & Displays
 - And much, much more!

Vendor Categories:

| | |
|---|---|
| Non-Profit Group/Organization | Any vendor or agency that is displaying or providing public information not for the purpose of direct sales to consumers. Service clubs or non-profits may be asked to provide proof of 501c3 status. |
| In-Town Business/Organization | Any business or organization located within Walpole with a Walpole Mailing address. Physical address required - PO Box addresses not accepted. |
| Out-Of-Town Business/Organization | Any business or organization located outside of the Town of Walpole. |

Questions about Walpole Day?

Email or Call Arielle Carney at acarney@walpole-ma.gov or 508-660-6371

Vendor Fee Schedule:

| | | |
|---|----------------|---|
| Non-Profit 10ft x 10ft booth space | \$20.00 | Non-Profit tables must provide an activity (i.e., games, crafts, etc.) that adds to the event. <ul style="list-style-type: none">• No Access to Power |
| In-Town 10ft x 10ft booth space | \$40.00 | <ul style="list-style-type: none">• No Access to Power |
| Out-Of-Town 10ft x 10ft booth space | \$55.00 | <ul style="list-style-type: none">• No Access to Power |
| Table Fee (Optional) | \$15.00 | If you'd like the Walpole Recreation Department to provide (1) 6-foot rectangular table for you, please add \$15.00 to your total vendor payment. |

Vendor Rules, Restrictions, and Guidelines:

- Walpole Day 2018 is a public, family friendly event. Walpole Recreation reserves the right to refuse and prohibit any product/service from being sold or distributed.
- The Event Director's actions and decisions are final.
- Event vendors will comply with the following conduct and responsibility requirements:
 - Event vendors will ensure that their staff/volunteers will conduct themselves in a personable and businesslike manner with customers, event staff/volunteers, public, and other vendors.
 - All music and noises are to be kept at a comfortable level and are not to bother surrounding neighbors
 - All vendors are to stay within their booth space
 - All vendors are to have their booth staffed at all times
 - All will keep their vendor spaces cleaned and will help to keep the premises clear of litter
- If any vendor should, at any given time, present him/herself in a manner contrary to these rules and regulations, or in a hazardous or offensive manner to the public, other vendors, staff, volunteers, etc, will, upon request of festival staff, immediately stop the offending conduct. Failure to immediately comply will be just cause for revoking a vendor's permit and his/her removal from the event. No refunds will be given.

Set-up & Tear down Instructions:

- Vendor Check-in begins at 8:30am
- At the time of check-in, vendors will be given vendor access instructions and booth location assignment. If you reserved a table for the additional \$15.00 fee, you will be shown where to pick-up your table. Tables CANNOT be reserved the day of the event.
- After you have checked in, you may begin setting up your booth space
- Vendor check-in ends at 10:30am
 - All vehicles must be removed from the vendor area by 10:30am
 - Vendor Booths must be set-up and ready by 11:00am
- Tear down is not permitted prior to 3:00pm
- There will be limited drive-up access for vehicles to enter the vendor area at tear-down

Questions about Walpole Day?

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Walpole Day 2018

Vendor Application Packet

This packet must be completed and submitted with the appropriate vendor fee by April 13, 2018 to guarantee review of your application for Walpole Day 2018.

Vendor/Company Name

Contact Person

Vendor Contact Information:

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

(All festival correspondence will be done through email)

Booth Description:

Please provide a brief description of your products and/or booth and enclose a photo of the product/booth with your application: _____

Please circle the vendor booth fee which best fits you (Please refer to the vendor fee schedule):

Non-Profit
**must provide
activity at booth

\$20

In-Town
Public Market
Vendor

\$40

Out-Of-Town
Public Market
Vendor

\$55

**Non-Profit booth activity (craft, game, etc.): _____

Food Vendors:

Food Vendors must be approved by the Walpole Recreation to attend Walpole Day BEFORE submitting any materials to the Walpole Health Department. Health Department Materials must be submitted by April 20th to ensure adequate time for processing and inspector scheduling.

Required Health Forms are attached to the back of this packet

Do you need a table? Yes No

One 6-foot rectangle table can be provided for an additional \$15 fee.

Vendors are strongly encouraged to bring and set-up a 10ft x 10ft canopy tent weights/sand bags are required (no ground stakes)


more on back

Food Vendors Only

This portion of the Walpole Day Application and \$75 Permit Fee (seperate from the Walpole Day Vendor Booth Fee) must be submitted directly to the Health Department.

TOWN OF WALPOLE

Health Department
135 School Street
Walpole, MA 02081

Permit Fee \$75

Temporary Food Service Application for Permit

**RETURN COMPLETED APPLICATION TO THE WALPOLE HEALTH DEPARTMENT
THIRTY (30) DAYS PRIOR TO THE EVENT.**

Please type or print legibly and complete attached Plan Review Layout.

BUSINESS/COMPANY NAME: _____

1. NAME and LOCATION OF EVENT: _____

DATE(s) _____

2. EXPECTED NUMBER OF PATRONS: _____

**3. MENU: ATTACH A LIST OF ALL ITEMS. CHANGES MUST BE APPROVED BY
THE HEALTH DEPARTMENT AT LEAST 7 DAY PRIOR TO THE EVENT.**

**4. EVENT COORDINATORS AND SERVE-SAFE CERTIFIED INDIVIDUALS:
(INCLUDE COPY OF CERTIFICATION)**

| NAME | ADDRESS | PHONE (work, home, cell) |
|------|---------|--------------------------|
|------|---------|--------------------------|

a. _____

b. _____

5. NUMBER OF ANTICIPATED FOOD BOOTHS: _____

6. LIST ALL POTENTIALLY HAZARDOUS FOOD ITEM AND CHECK PREPARATION

SECTION A: At the approved kitchen:

| FOOD | Thaw | Cut/ Assemble | Cook | Cool | Cold Holding | Reheat | Hot Holding | Portion Package |
|------|------|------------------|------|------|-----------------|--------|----------------|--------------------|
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |
| 4. | | | | | | | | |
| 5. | | | | | | | | |

SECTION B: At the booth:

| FOOD | Thaw | Cut/ Assemble | Cook | Cool | Cold Holding | Reheat | Hot Holding | Portion Package |
|------|------|------------------|------|------|-----------------|--------|----------------|--------------------|
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |
| 4. | | | | | | | | |
| 5. | | | | | | | | |

Note: If your food preparation procedures cannot fit these charts, please list all of the steps in preparing each menu item on an attached sheet.

****Food Vendors Only****

7. TIME OF EVENT SET-UP: _____

8. DESCRIBE PROPOSED RESTROOM FACILITIES (TYPE, NUMBER, and LOCATION):

9. WILL ELECTRICITY BE PROVIDED TO THE FOOD BOOTHS: _____ YES _____ NO

10. DESCRIBE THE POTABLE WATER SUPPLY AND DELIVERY:

11. DESCRIBE THE WASTEWATER DISPOSAL SYSTEM:

12. DESCRIBE GARBAGE DISPOSAL:

13. _____
SIGNATURE TITLE DATE

NOTE:

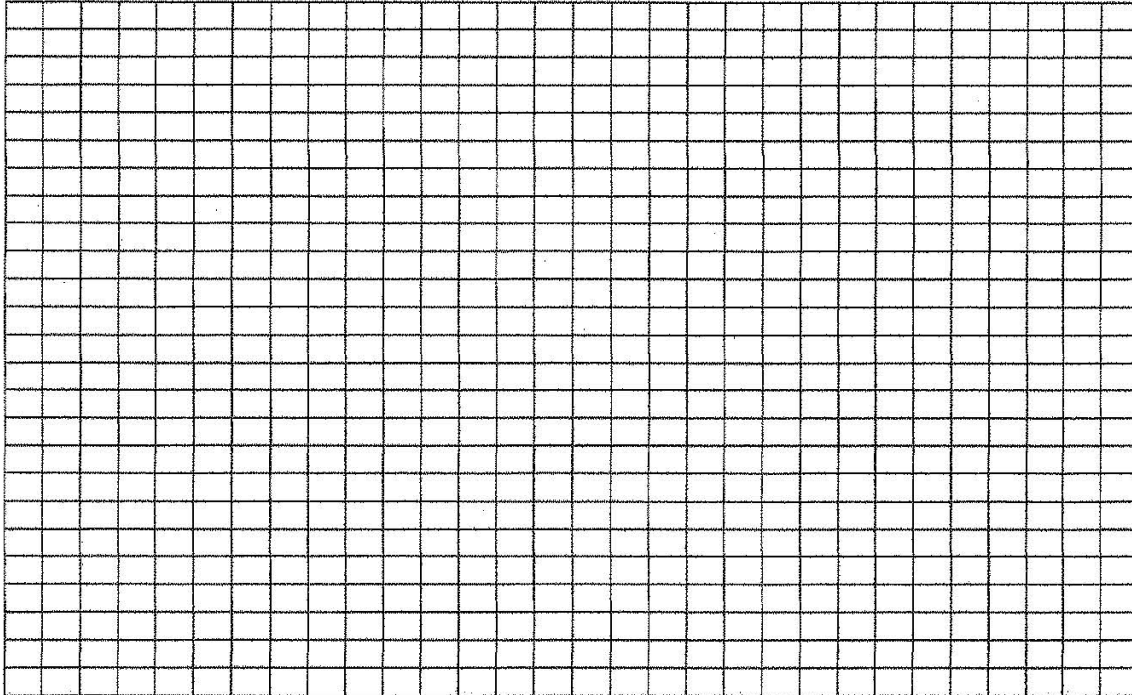
By providing the above information, you will be assisting us in identifying potential public health problems that might occur during your event. Solving these problems in advance will provide the opportunity for a successful and smooth operation. If applicable, you must notify any food booth participants that they must submit a Temporary Food Establishment Permit application no later than **two (2) weeks prior to the event.**

****Food Vendors Only****

Plan Review:

A. Draw in the location and identify all equipment including handwash facilities, dishwash facilities, ranges, refrigerators, worktables, food/single service storage, etc. (A certificate from the Fire Department is required for all open flames.)

B. Describe floor, wall and ceiling surfaces: _____



BOARD OF HEALTH COMMENTS:

PERMIT NUMBER _____ APPROVED BY: _____ DATE _____
Copy to Applicant: In Person Mailed Date _____