



INSECT VENDOR APPLICATION

Oxnard Insect Festival
June 4, 2022 • Plaza Park

FOR FESTIVAL USE ONLY

Date Received _____ Approved _____
 Space Fee _____ Confirmed _____
 Electricity Fee _____ Space # _____

Please complete all sections. Incomplete applications will not be accepted. **THE APPLICATION DEADLINE IS April 22, 2022.**

Business / Company Name: _____

Contact Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ E-mail: _____

Food Booth Price Qty. Total

Type 1: Open

10x10 space \$250 x _____ = _____

10x20 space \$300 x _____ = _____

Type 2: Pre-Packaged Food ONLY

10x10 space \$200 x _____ = _____

10x20 space \$250 x _____ = _____

MFF Space (Mobile Food Facility) \$300 x _____ = _____

MFF Type (Circle One): 1 2 3 4

Vehicle License Plate # _____

VCEHD Annual Permit # _____

Non Food Booth Price Qty. Total

ARTS & CRAFTS VENDOR

10x10 space \$150 x _____ = _____

10x20 space \$200 x _____ = _____

COMMERCIAL VENDOR \$300 x _____ = _____

Optional Services

Electricity (per 20 amp hookup) \$ 25 x _____ = _____

Craft Vendors: Please make sure to cover ground with a tarp.

Total Booth (Due to City of Oxnard)

payable via check or money order \$ _____

Additional Food Vendor Fees

Cleaning Deposit, per space (separate check) \$ 100 x _____ = _____

Are you bringing your own three-compartment sink? Yes ___ No ___

If not, the Festival has sinks on-site for use. First come, first served.

VC Environmental Health Permits - Complete the appropriate Community Event Operator Application. VCEHD Fees waived through June, 30, 2022. Reminder: All food vendors are required to contact the Ventura County Environmental Health Department (805) 654-2431 for a permit application.

TFF-1: Handling Open / Potentially Hazardous Foods \$0

TFF-2: Prepackaged / Non-Potentially Hazardous Foods \$0

DD214: (see rules and regs, include copy with this application)

Description - Be specific and include how you will use insects.

Special Requests-

Submit this application along with fees to: **Oxnard Insect Festival, 305 W Third St (1st Floor, West Wing) Oxnard, CA 93030.**

See page 2 for vendor acknowledgements



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2nd Annual Oxnard Insect Festival
June 4, 2022 • Plaza Park

VENDOR ACKNOWLEDGEMENTS. *Please read and initial each item. Incomplete applications will not be accepted.*

1. I have a check payable to City of Oxnard for booth rental. ____
2. I acknowledge this is a "Rain or Shine" event. ____
3. I agree to keep the booth area clean. ____
4. I agree to bring sandbags or weights for canopies; stakes/spikes will not be allowed. ____
5. I agree to be respectful to patrons and participants. ____
6. I agree to arrive NO LATER than 8:30 am and leave NO EARLIER than 4:00 pm. ____
7. I acknowledge that NO REFUNDS will be issued after this application is submitted. ____

ADDITIONAL FOOD VENDOR ACKNOWLEDGEMENTS

8. I have a separate check payable to Ventura County Environmental Health Division. ____
9. I have a separate check for the cleaning deposit, payable to City of Oxnard. I understand that this check will be deposited. ____
10. I have included a photo showing insect source packaging /ingredients. ____
11. I have included a completed W-9 form. ____

WAIVER OF LIABILITY

In consideration for being permitted to participate in the Oxnard Insect Festival, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which may occur as a result of participation in this activity. This release is intended to discharge in advance The Oxnard Insect Festival, City of Oxnard, Oxnard PAL, its officers, directors and volunteers, sponsors, contractors, agents, and sureties from any liability arising out of, or connected in any way with, my participation in this activity, even though that liability may not arise out of the negligence or carelessness on the part of the persons and entities mentioned above. I agree for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless the persons and entities mentioned above and their respective elected and appointed officers, volunteers, official agents, and employees from any and all claims, demands, actions, or suits arising out of or in connection with my participation in the activity.

I have read the "Waiver of Liability" and the vendor information included with this application form and agree to the terms and conditions as outlined for this activity.

Applicant Signature: _____

Date: _____

Questions or concerns? Contact us! (805) 385-7995 • oxnardrec@oxnard.org