



PO Box 72313
Thorndale, PA
19372

Chester County Mac & Cheese Cook-off



2017 VENDOR APPLICATION – DUE MAY 13

Event: June 4, 2017 • 12pm – 4pm • Rain or Shine

Vendor Name: _____ Contact Name _____
 Mailing Address _____ City, State: _____
 (street): _____
 Cell Phone: _____ Business Phone: _____
 Email: _____ Fax: _____
 Product(s) to be Sold: _____

2017 VENDOR TERMS & CONDITIONS

For more information call Autumn Katzenmoyer, #484-885-6643
or email info@macncheesecookoff.com

1. All Vendors hereby agree to indemnify and hold harmless the Rotary Club of Thorndale-Downingtown and its volunteers for all costs and expenses for any bodily injury or damages. We further waive all rights of subrogation against the Rotary Club of Thorndale-Downingtown and agree to name them additional insured on all liability policies.
2. The CCMCC takes place on Park Lane, Downingtown, PA. The CCMCC is a rain or shine event and will not be rescheduled due to inclement weather.
3. All Vendors who wish to compete agree to the terms and conditions set forth in the CCMCC Teams Application. This application, including terms and disclosures, can be requested by emailing info@macncheesecookoff.com.
4. You are responsible for applying for the proper CC Health Department Temporary Permits for the day of the event.
5. **Vendors will be limited to local food and agricultural vendors. Aside from sponsored booths, no craft or other products and services will be permitted this year.**
6. If you need electricity, electric *may* be available upon request. You then are responsible for bringing an extension cord. If you need water, non-drinking water will be available; however we need advance notice to ensure access. You are responsible for bringing the appropriate hose based on the water's usage purpose.
7. Set-up starts at 7:30am. No admittance of vehicles on the grass after 10:00 am. The CCMCC starts at noon and will conclude at 4pm.
9. **Cost for a 10'x10' vendor space will be \$50. Payment must be received with the application.**

Vendor Contact Name _____

Vendor Contact Signature* _____

*By signing this you hereby agree to the terms and conditions. No Vendor will be permitted without written consent to these terms.