

POLLINATOR FEST

VENDOR AGREEMENT & CONFIDENTIAL PARTICIPANT RISK/RELEASE FORM



Pollinator Fest
Saturday, September 28, 2024
10 AM – 2 PM
Butler SWCD – 1810 Princeton Road, Hamilton 45011

Open to Public, Free Admission, Free Vendor Booths
Event will be held rain or shine

Pollinator Fest
Come celebrate pollinators and all the benefits they bring to our world. Our lives depend on them!

Vendor Space
Each vendor will be allotted a 10'x10' space, assigned by Butler SWCD. Vendors will need to bring own tent, table, and chairs. Electric and water are not available. There is no cost for a vendor space.

Vendor Acknowledgement
I agree to set up in the space assigned by Butler SWCD. I will be set up by 9:30 AM and I will not pack up and leave until after 2 PM. Failure to adhere to these times may prohibit me from participating in this and other future events held by Butler SWCD. At Pollinator Fest, I will only sell native plants or items related/themed to pollinators. Any other unauthorized or illegal items may result in Butler SWCD asking me to vacate the event.

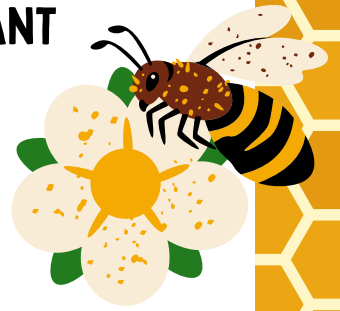
Risk & Release Waiver
I agree to assume the full risk of any injuries, damages, or loss which I may sustain as a result of participating in any and all of the activities connected with or associated with this program, or products provided, including allergic reactions to foods consumed. I agree to, and do hereby waive and relinquish any and all claims against, and agree to full release, hold harmless, and indemnify, The Butler SWCD Board of Supervisors, its officers, employees, agents, and volunteers from any and all claims related to any illness, injury, including loss of life, property damage, or loss of any description, which I may sustain arising out of, or in any way associated with my participation in Butler SWCD's Pollinator Fest.

Food Vendors
Food Trucks and any vendors selling food at Pollinator Fest – it is the responsibility of any vendor selling food to have proper permitting from the City of Hamilton Health Department. Please contact the Health Department to make sure you are in compliance 513-785-7080. **No water or electric on site.**

Photo Release
I authorize the Butler SWCD staff to publish, in print, electronic, or video format, the likeness or image of myself or my child/ward, without limitation.

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I agree to these conditions:

SIGNATURE: _____ DATE: _____

PRINT NAME: _____

VENDOR NAME:

ADDRESS:

CITY

STATE

ZIP

E-MAIL:

PHONE:

NAME OF CONTACT:

DISPLAY/VENDOR TYPE:

- HONEY PRODUCTS: _____
- PLANTS: _____
- ART & CRAFTS: _____
- ARTISAN GOODS: _____
- FOOD TRUCK: _____
- EDUCATIONAL DISPLAY/ITEMS: _____
- OTHER: _____

COMPLETED FORM DUE 9/20/24

SUBMIT FORM TO:
butlerswcd@bcOhio.gov

or

Butler SWCD
1802 Princeton Road, Suite 300
Hamilton, Ohio 45011