



**Please read the vendor requirements in full.**

**Event:** Fall Festival **Date:** October 9, 2021 **Event Time:** 1:00 p.m. - 4:00 p.m.

**Location:** Creekside Park at 3200 Lost Road, Lake Elsinore

- There is a \$20 fee per vendor space.
- We accept checks or money orders. Please make payable to Cottonwood Canyon Hills.
- All fees are non-refundable.
- **If you are selling anything**, you will need a Lake Elsinore business license.
  - If you do not possess a license, please indicate on your form that you need a license and you can obtain a one-day permit through us. There is an additional \$10 fee.
  - If you have already possess a LE business license, please provide a copy.
- **If your booth sells food**, you must demonstrate a Riverside County Health Permit and Certificate of Insurance naming the City of Lake Elsinore as additionally insured.
  - City of Lake Elsinore  
130 S Main Street  
Lake Elsinore, CA 92530
- Each booth must provide single, pre-packaged candy to pass out.
- Vendors must supply their own equipment i.e. easy-ups, tables, chairs, etc.
- No electricity or running water is available at the vendor spaces.
- Vendors can begin setting up at 11:30 a.m. Booths must be set-up must by 12:45 p.m.
- Tear down begins at 4:00 p.m.
- Please DO NOT tear down or leave early! If you finish early, we ask that you stay put and enjoy the event. **Booths that leave early will not be invited back.**
- We want to promote family-friendly environment and we reserve the right to censor any booth.
- Your spot is not secured until all necessary paperwork and fees are received.
- We highly recommend that each booth has a game or interactive feature to promote foot traffic at your booth.
- Fall décor is encouraged!

**The deadline to submit a complete vendor application is September 23<sup>rd</sup>, 2021.**

If you have any questions or concerns, please contact Tania at Cottonwood Canyon Hills by calling (800)400-2284 or via email at [tcamacho@actionlife.com](mailto:tcamacho@actionlife.com).



**Please retain the vendor requirements for your records.**



## Vendor Application Form

Please complete all sections.

Name of Business: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

How many spaces will you need? (We typically offer a 11' x 11' space) \_\_\_\_\_

Will you be selling any items at your booth? (Check a box)  Yes  No

*If yes, you must have a Lake Elsinore business license. Do you have a Lake Elsinore business license?* (Check a box)  N/A – I am not selling anything at my booth  
 I have a LE business license  I need a LE business license (Additional \$10 fee)

Description of items you will be selling/promoting: \_\_\_\_\_

***If your booth sells food, you need to demonstrate a Riverside County Health Permit and a Certificate of Insurance.***

Do you have a Riverside County Health Permit? (Check a box)  Yes  No  N/A

Can you demonstrate Insurance? (Check a box)  Yes  No  N/A

I have read and agree to comply with the vendor requirements:  Yes

Note for event organizers: \_\_\_\_\_

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### Office Use Only

- |  |   |
|--|---|
| <input type="checkbox"/> Payment Received - Check# _____ | <input type="checkbox"/> Insurance Received |
| <input type="checkbox"/> Waiver Received                 | <input type="checkbox"/> Health Permit      |
| <input type="checkbox"/> Business License Received       |   |

**COTTONWOOD CANYON HILLS COMMUNITY ASSOCIATION**

**WAIVER AND RELEASE**

For and in consideration of the undersigned ("Participant") being permitted to participate in a "Fall Festival" event ("Activity") being conducted by Cottonwood Canyon Hills Community Association ("Association") at the City of Lake Elsinore's Creekside Park on October 9, 2021. Participant hereby agrees, acknowledges and understands that participation in the Activity naturally involves the risk of injury to Participant, whether Participant or someone or something else, causes such injury. Further, Participant hereby agrees, acknowledges and understands that participation in the Activity is voluntary and Participant voluntarily agrees to accept such risk of injury. Participant hereby releases, waives and discharges Association, its directors, officers, agents and employees from any and all liability for any injury, including, without limitation, personal, bodily or mental injury, including death, economic loss or any damage to Participant, directly or indirectly arising out of or resulting from, or in any way connected with, participation in the Activity by Participant. Further, Participant hereby agrees to indemnify, defend and hold Association, its directors, officers, employees and agents, harmless from and against any and all claims, liabilities, damages, demands or liabilities for any such damage, loss, injury, or death, and any and all costs and expenses incurred by Association in connection with Participant's participation in the Activity (including but not limited to reasonable attorneys' fees and court costs). Participant agrees to pay Association in full and promptly upon demand for any and all loss of and damage to Association's property caused by, or growing out of, Participant's participation in the Activity.

Date: \_\_\_\_\_,2021

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Participant's Name (please print)