



Vendor Application 2022

Event will take place on Friday December 2: 5:00 - 8:00pm AND
Saturday December 3: 10:00am - 4:00pm
At Revel 32 on Cannon Street in Poughkeepsie

Business

Name: _____

Vendor Name/Business

Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone (if different): _____

Email: _____

Website: _____

Tax ID, if
applicable: _____

Vendor Fee: ☐ \$120

Please submit payment with vendor application. Please note that your check will not be cashed, and your credit card will not be charged until you are approved as a vendor.

☐ Make checks payable to Family Services with "Festival of Trees" as memo

☐ Credit Card # _____ Exp Date: _____
CVV#: _____

Please describe the merchandise you plan to sell and attach or include two photos:

Do you use social media to promote your business? If so, please list them here. This information will be used for cross promotion as the event approaches. _____

We ask that all vendors contribute an item/items worth at least \$25 for our raffle. Please tell us below what our donation will be. Due to the nature of our raffle, it will not be possible for you to change your donation after you have submitted this application.

Vendors are encouraged to have general liability insurance.

FOOD VENDORS – Please complete the below section. All others can skip to the next section.

Are you a NYS bona fide producer or agricultural products (e.g fruits and vegetables, dairy products, eggs, meat or poultry, plants or flowers, maple syrup, honey or other processed products, like fruit preserves, that use the producers farm-grown ingredients)? _____

By submitting this application, I certify that I hold the appropriate permit to produce and sell food in NYS. I will abide by all the guidelines required for my type of permit and hold Family Services harmless for any fines I may incur for not complying with those guidelines.

Please list your Home Processor/Food Vendor NYS Permit Information:

(Please include a copy of the permit with your application.)

Food Vendors are required to have insurance with \$1 Million minimum coverage and to provide Family Services with a certificate naming Family Services and Revel 32 as additionally insured.



Terms & Conditions

- All vendors must be approved by the event committee. Spaces will be filled on a first come, first serve basis. The event committee reserves the right to limit the number of vendors per business type to ensure variety at the event. There will only be one representative per direct sales company.
- Full payment must accompany the application to be considered. If your payment is received after your application, that will be the date your application is considered received.
- Booth spaces are 8x8. **No** items are to be affixed to the walls of Revel 32. Vendors are responsible for their own displays.
- Set-up is on Thursday, December 1 between 12-3 or Friday, December 2 between 10-3. Vendors must be fully set up 15 minutes prior to event start time. Doors will open for vendors on Friday 4:00 pm and Saturday at 9:00 am. Vendors must participate in **both** event days. Early break-down is strictly prohibited.
- No pets, except service animals.
- Family Services reserves the right to ask vendors to remove items from sale that may be deemed offensive in any way.
- If applicable, you must display your NYS Certificate to Collect Sales Tax in your booth.

By signing and submitting this application, I hereby release, indemnify, and hold harmless Family Services, the Festival of Trees event organizers, Revel 32 and their officers, directors, partners, agents, sponsors, members and employees, family and friends assisting at the event, from any and all claims, causes of actions and liability arising from or in any way connected to the Festival of Trees Event. Vendors are responsible for monitoring the security of their booth. Event organizers are not responsible for lost or stolen items.

By submitting this application, I understand that I am responsible for collecting, reporting, and remitting any and all appropriate tax for all sales that occur at this event. I accept sole responsibility for any penalty, civil or otherwise, should I fail to follow the rule of law set forth by the Internal Revenue Service. I release Family Services from any and all liability in this regard.

I agree to all the terms and conditions listed in this application.

Signature

Date

Please return completed application, payment, photos and copies of any required certificates to:

Trish Prunty
VP of Philanthropy and Communications
Family Services
29 North Hamilton Street
Poughkeepsie, NY 12601

Festival of Trees event questions and vendor questions should be directed to:

Trish Prunty, 845-337-8236 or tprunty@familyservicesny.org

