A black and orange sign with white text

Description automatically generated

**JUNE 27TH- JUNE 29TH , 2025**

**FOOD VENDOR APPLICATION FORM**

PLEASE COMPLETE THE FOLLOWING APPLICATION FORM. APPLICATIONS ARE PROCESSED ON A FIRST COME BASIS. To ensure that your space is reserved, ***a non-refundable*** security deposit of $200.00 payable to ***1000 Islands Family Ribfest***; is to be submitted with your application. A contract and invoice will follow.

NAME OF VENDOR/EXHIBITOR/COMPANY

Click or tap here to enter text.

CONTACT NAME:

Click or tap here to enter text.

ADDRESS: Click or tap here to enter text.

PHONE

NUMBER: Click or tap here to enter text. EMAIL: Click or tap here to enter text.

BRIEF DESCRIPTION OF PRODUCT/SERVICE:

Click or tap here to enter text.

**BOOTH SIZE** **(*PLEASE SELECT ONE*)**

10 ft wide by 10ft deep 10ft wide by 20ft deep 20ft wide by 20ft deep 30ft wide by 10ft deep  OTHER: Click or tap here to enter text.

**ELECTRICAL *(PLEASE SELECT ONE*)**

15 AMPS 30 AMPS 50 AMPS OTHER: Click or tap here to enter text.

Please tell us what type of electrical connection you have (ex twist lock)

Click or tap here to enter text.

\*Electricity is limited and approved applicants will be assigned space at the discretion of the Vendors Chair.

\*Do you have an extra food storage supply truck or device as part of your operation and will it need an additional electrical connection?

YES or NO

If yes please indicate what type: Click or tap here to enter text.

**FEES (PLUS HST 13%)** FOR JUNE 27th – JUNE 29th, HYDRO AND WATER INCLUDED

*SITE SIZE FEE HST TOTAL*

10 X 10 $750 + 97.50 = $847.50

10 X 20 $800 + 104.00 = $904.00

20 X 20 $850 + 110.50 = $960.50

30 X 10 $950 + 123.50 = $1073.50

PAYMENT

Please email your application or any questions to [vendors@1000islandsfamilyribfest.ca](mailto:whitney@bickerton.com)

A contract and invoice will be emailed back to you.

To reserve a space, please submit a non-refundable security deposit of $200 payable to 1000 Islands Family Ribfest by the following methods.

1. E-transfer emailed to [ribfestvendorsgananoque@gmail.com](mailto:ribfestvendorsgananoque@gmail.com) Be sure to include your company name in the comments/memo section.
2. Certified cheques ONLY, payable to 1000 Island Family Ribfest, please contact the Vendors Chair to discuss where to mail or drop off.

*PLEASE ADVISE THE VENDOR CHAIR WHEN PAYMENT IS MADE*

\*\*\*THE REMAINING BALANCE IS *NO LATER THAN May 31st,2025.*

FOODSERVICE

Wastewater (gray water), grease removal, and garbage removal will all be disposed of daily by Ribfest volunteers.

Cold water is supplied to food vendors with a tap hookup.

Tightly covered garbage & refuse receptacles will be provided at each food outlet.

*THE FOLLOWING ITEMS ARE YOUR RESPONSIBILITY*

* SUBMIT HEALTH FORMS (provided) to VENDORS CHAIR **NOT LATER THAN May 31st,2025.**
* ENSURE YOUR BOOTH PASSES HEALTH INSPECTION AND MEETS ALL LEGAL AND MUNICIPAL REQUIREMENTS FOR THE HEALTH INSPECTOR ON FRIDAY MORNING, 27th (a time will be provided when available)
* IT IS YOUR RESPONSIBILITY TO BRING A HOSE TO CONNECT TO OUR COLD WATER TAP.
* IF HOT WATER IS REQUIRED IT IS YOUR RESPONSIBILITY.
* A SEPARATE HAND WASHING BASIN EQUIPPED WITH SOAP IN A DISPENSER AND PAPER TOWELS.
* A PROPERLY INSTALLED TWO-COMPARTMENT SINK IS REQUIRED FOR THE CLEANING OF UTENSILS USED IN FOOD PREPARATION. (this is in addition to a hand wash sink)
* CLEANING & SANITATION SUPPLIES MUST BE ON HAND IN EACH UNIT.
* MECHANICAL REFRIGERATORS MUST BE PROVIDED FOR THE STORAGE OF PERISHABLES. COLD FOOD MUST BE KEPT AT/BELOW 4 DEGREES CELSIUS. A THERMOMETER MUST BE AVAILABLE IN EACH UNIT.

PROOF OF INSURANCE

Proof is required to be sent to the Vendors Chair. Your insurance policy must name additional insured parties:

Rotary Club of Gananoque, Box 516 Gananoque, ON K7G 2V1.

Lions Club of Gananoque, 660 Queen St Gananoque, ON K7G 2B2

Town of Gananoque, 30 King St E, Gananoque, ON K7G 2T6

PLEASE FILL IN ALL INFORMATION AND SIGN BELOW TO INDICATE THAT YOU UNDERSTAND AND ACCEPT THE TERMS STATED IN THIS APPLICATION.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME: Click or tap here to enter text.

DATE: Click or tap here to enter text.

Tatiana Holbik

Vendors Chair Ribfest 2025