



4th Annual Berthoud Snowfest
Saturday, December 14, 2019 10 a.m. - 4 p.m.
Downtown Berthoud, New Freedom Church
250 Mountain Ave, Berthoud, Colorado

**BERTHOUD SNOWFEST ARTISAN MARKET REGISTRATION FORM
(Handmade Items Only) – Deadline December 6, 2019**

Business/Group/Organization: _____

Contact Person: _____ Telephone: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

E-mail: _____

Berthoud Sales Tax License #: _____ (Town requirement to be a vendor.)

NO REFUNDS

Booth Space:	8 x 8	8 x 16 (DBL FEE)	LATE FEES (after 12/6/19)
\$50 Non-profit (501c3) Organizations	_____	_____	-----\$55 late fee vendor price
\$50 BACC members	_____	_____	-----\$75 late fee vendor price
\$75 Non-members	_____	_____	-----\$100 late fee vendor price
\$100 for Premium Spots (see map)*	_____	_____	-----not available

(*We will assign these on a first come, first paid basis. They are highlighted in yellow on the map.)

_____ I need electricity, **\$5 more added to vendor fee** (limited outlets – payment required before assignment)

_____ I would like to **rent a rectangular table for \$5**. (We are limited to 8 tables.)

Please list the handcrafted items that you plan to bring. We'd like to keep duplication to a minimum so details are important. _____

We will provide the **space** and two (2) chairs.

The Berthoud Snowfest has the right to deny any vendor application and will determine the vendor booth location. **Vendor locations will not be assigned until payment is received.** You will be notified of vendor assignments by email with a vendor map attached by **December 12, 2019**. Booth set-up is 7:30-9:30 a.m. on December 14 and booth tear down begins at 4 p.m. the same day. Size of vendor assigned space is approximately 8 feet x 8 feet. Vendor parking will be shared in our vendor letter on 12.12.19. Vendors are strongly advised to carry their own liability insurance. **NO DIRECT SALES COMPANY VENDORS, NO FOOD VENDORS. NO REFUNDS.**

INDEMNITY AGREEMENT

I (we) understand that participation in the Berthoud Snowfest activities are accompanied by certain risks. In consideration for being allowed to participate in these activities, I (we) waive and release the Berthoud Area Chamber of Commerce, Grace Place, and all other Berthoud Snowfest organizers and persons participating in this event from liability proximately caused by their negligence. I (we) agree to indemnify and defend all organizations and persons from all liability arising from my (our) participation in the activities of Berthoud Snowfest. Workers shall not be held liable for property damage, theft or personal injury to exhibitors, its agents regardless of how such injury or damage may have occurred. BACC reserves the right to accept or reject any exhibitor and shall have the right to make rules and regulations for the festival that it deems proper and necessary.

Signature: _____ Date: _____



BERTHOUD SNOWFEST VENDOR PAYMENT FORM

PLEASE PRINT

Business/Group/Organization _____

Contact Person _____ Telephone _____

Payment (circle one): CHECK # _____, CASH, CREDIT CARD (Visa or Master Card only)

For Credit Card Payments only:

Name on Credit Card _____ Card # _____

Expiration Date ____/____ CVV CODE (on back) _____

Signature _____

Billing Address _____

City _____ State _____ Zip Code _____

Please make sure to include:

_____ Completed Registration Form

_____ Payment (Make vendor check payable to BACC and MAIL TO: BACC, P.O. Box 1709, Berthoud, CO 80513.)

_____ Berthoud Sales Tax License number on Registration Form. Must have a State of Colorado License first. \$20 one-time fee. Make tax check payable to Town of Berthoud and MAIL TO: Town of Berthoud, P.O. Box 1229, Berthoud, CO 80513. Download form on Berthoud Day website page. (www.BerthoudOktoberfest.com)

Please return the completed vendor registration form, payment form and payment to:

Berthoud Area Chamber of Commerce
P.O. Box 1709, Berthoud, CO 80513

If you have any questions, please call the Berthoud Area Chamber of Commerce office at 970-532-4200 or email us at bcc@berthoudcolorado.com.

For Office Use Only

Date Received: _____ Form of Payment: _____ Amount: _____

Space Assigned: _____