



4th FDSWF 3.21 Fun Run & BUDDYWALK®

national down syndrome society®
EDUCATE | ADVOCATE | CELEBRATE

Saturday
10-26-2019
Raymond
James Stadium



**Vendors
Wanted**

**VOLUNTEERS
WE NEED YOU**

www.ds-stride.org/fdswfbuddywalk



Please check type of booth	
<input type="checkbox"/> Food Vendor <input type="checkbox"/> Exhibitor (commercial) <input type="checkbox"/> Craft Vendor	<input type="checkbox"/> Non-Profit* (education and resources) <input type="checkbox"/> Partner

You will be provided the opportunity to promote your business to over 4,000 guests. Vendor spaces are only \$75 and come with a table and 2 chairs, please bring your own tent and decorations. *NOTE we'd love to feature businesses that are owned or ran by individuals with Down syndrome, there will be no fee for these businesses, and they will be given priority.

Vendor Information
Business or Organization Name:
Primary Contact:
Mailing Address:
City/State/Zip
Phone (business and home):
Cell:
Email:
Website/URL:
Tax ID #

Vendor Booth Space <i>(check appropriate booth)</i>	
<input type="checkbox"/> Commercial Exhibitor/Craft Vendor/Partner 8ft table and two chairs provided	(\$75)
<input type="checkbox"/> Non-Profit (education and resources)/Food Vendor* with 8ft table and two chairs provided	(Free) Bring your own tent, table, and chairs. (\$15)

*Food Vendors can either pay the \$75.00 or donate a portion of their sales.

Please list all items that will be sold and their prices (or attach a list/menu) *

***The Buddy Walk Committee reserves the right to disallow sales of any items. You will be contacted immediately if there is an issue with the items you will be selling (applications accepted on a first-first serve basis).**

Terms for Application

- ☐ The non-refundable fee is due NO LATER than **10/21/19** (please see application for appropriate fee).
- ☐ Make checks payable to: FRIENDS - DOWN SYNDROME WEST FLORIDA.
- ☐ The FDSWF will provide an insurance rider listing Sports Authority Raymond James Stadium as additional insured.
- ☐ Vendors should have a copy of their valid FL Sales Tax Certificate of Authority on the day of the Buddy Walk.
- ☐ Mail payment and mail application to: FDSWF, P.O. BOX 677 BRANDON, FL 33509
- ☐ The committee will assign vendor location and reserves the right to adjust booth placement prior to the event.
- ☐ *Applications will be accepted on a first-come, first-serve basis.* Each application will be evaluated, and vendors will be contacted if adjustments need to be made. If in doubt, please call prior to submitting your application (630)914-4114.
- ☐ The Buddy Walk Committee may, for publicity purposes, use any photographs/slides and information received or obtained.
- ☐ All vendors, crafters, and educators are responsible for their own tents, clean water supply, generators, and for cleaning up their booth.
- ☐ Vendor Set –Up is Saturday, October 26th at 7-10 a.m. All vendors must be set up by 12p.m. Vendor break-down is 3 p.m. No vehicles may enter the vendor area until the Buddy Walk event closes. All vendors must vacate the area at the conclusion of the Buddy Walk.
- ☐ Each vendor will park personal vehicles in the designated areas.
- ☐ You may move from their assigned location during the Buddy Walk, request a volunteer to man your table.
- ☐ Vendor represents that he or she has insurance coverage for said items to cover loss due to vandalism, theft, or any other casualty. Loss due to fire, theft, damage, or injury is the sole responsibility of the exhibitor. It is specifically agreed that FDSWF shall be held harmless for any claim of theft, vandalism, casualty, or loss.
- ☐ Vendors are responsible for operating within any local, state, or federal guidelines or laws. The vendor shall defend, indemnify, and hold harmless FDSWF, its employees, volunteers, and agents, from and against all claims, damages, losses, and expenses (including, without limitation, reasonable attorney’s fees) arising out of, or in consequence of, any negligent or intentional act or omission of the Vendor and/or the Vendor’s employees or agents, to the extent of the responsibility of the Vendor and/or the Vendor’s employees or agents for such claims, damages, losses, and expenses.

Agreement and Signature - <i>By submitting this application, I accept all terms set forth in the enclosed Terms for Application.</i>	
Name (print):	
Signature:	Date:

QUESTIONS? CALL YOUR VENDOR COORDINATOR FOR THE BUDDY RUN/WALK, SUE WARADY-KEENE (630)914-4114 SUE@FRIENDSSUPPORT.ORG.

Mail completed form with payment by October 21, 2019 and make checks payable to: **FRIENDS - DOWN SYNDROME WEST FLORIDA**
P.O. Box 677 Brandon, FL 33509