

Vendor Application Event Form (YAADFest)

Complete and return form to Niyah at yaadfest@gmail.com at least **20 days** before the start date of this event.

Be a vendor at YAAD Fest, our premier outdoor music and food festival on September 21, 2024.

For assistance, please contact Niyah at 1-(437) 499-9223 or yaadfest@gmail.com

Vendor Information					
Contact Name:		Vendor Name:			
Corporation/Numbered Company:					
Address:		Is this your first event as a Vendor? Yes No			
City/town:	Postal Code:	Fax:			
Business Phone:	Cell Phone:	Email Address:			
Event Information					
Event Name:		Event Location/Address:			
Participation Start Date:		Last Date of Participation:			
Days of operation (check all days that apply): Mon Tues Wed Thu Fri Sat Sun		Hours of Operation:			
Proposed Items/Food menu (if you need additional space to list all food and suppliers, attach a separate page)					
Items/Food items offered to the public			Food Supplier Phone		
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Food Safety Inventory					
Management and Employee Food Safety Knowledge					
Will a certified food handler be on-site each day that you are participating in this special event? Yes No					
If yes, how many certified food handlers will be present:					
Cold Holding	Refrigerator (4C or lowe	er) An insulated cooler	with ice (4C or lower)		
How do you intend to keep food co	ld? Chest freezer (-18C or ld	ver)			
Hot Holding	Steam table	BBQ/Grill			
How do you intend to keep food ho	t? Chafing dishes	Other (specify):			
Food Preparation – indicate the type of preparation that will be done at the event:					



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Food Handling and Storage						
Contact Name:						
What type of equipment will you have on-site to handle and store food? (check all that apply)						
	Liquid soap with paper towels		partment dishwashing station			
Sanitizing solution	Hairnets/hats	Probe the	ermometers			
☐ Thermometers for coolers/refrigerators	Serving utensils – specify total number:					
Other (specify):	Cooking u	utensils – specify total number:				
Equipment Layout for Booth – This section must be completed						
Provide an equipment layout for your booth application.	n at the event. The layout can be	hand drawn i	n the space below or attached to this			
 Please take the following into consideration: At a minimum, temporary handwashing stations must consist of an insulated container with a spigot that provides a continuous flow of running water, liquid soap, paper towels and a bucket to collect waste water. The temporary handwashing station must be set up on an elevated surface (i.e., table). Hand sanitizers do not replace the requirement for handwashing stations. Comments						
Date:	Event Director's Signa	ature	Vendor's Signature			