



**CITY OF CHINO
2023 CHINO DAYS
INFORMATION/RETAIL VENDOR APPLICATION**
City Hall Lawn
13220 Central Avenue, Chino
March 18-19, 2023

OFFICE USE ONLY:	
BOOTH #:	_____
RECEIPT #:	_____

Name of Organization/Company _____ Email _____
 Full Name of Contact Person _____ DOB _____
 Address _____ City _____ Zip _____
 Day () _____ Cell () _____ Cell Phone Provider _____
 Emergency Contact _____ Phone () _____ Relationship _____

PARTICIPANT INFORMATION (Select Event Date and Vendor TYPE) Non-profit: # _____

SATURDAY, MARCH 18, 12:00-9:00 P.M./SUNDAY, MARCH 19, 11:00 A.M.-5:00 P.M.

_____ *Cottage Food Vendor Fee:	_____ Saturday \$35	_____ Sunday \$35
_____ Non-profit Information Vendor Fee:	_____ Saturday \$15	_____ Sunday \$15
_____ Non-profit Retail Vendor Fee:	_____ Saturday \$45	_____ Sunday \$45
_____ *Commercial Retail Vendor Fee:	_____ Saturday \$65	_____ Sunday \$65
_____ *Commercial Information Vendor Fee:	_____ Saturday \$40	_____ Sunday \$40

**Commercial = Operating a business for profit.*

NOTICE: PLEASE BE AWARE OF THE FOLLOWING:

PLEASE INITIAL THAT YOU HAVE READ THESE ITEMS: _____

- IF THE EVENT IS CANCELLED DUE TO SEVERE WEATHER, A FULL REFUND WILL BE ISSUED FOR THE BOOTH FEE. **BUSINESS LICENSING DOES NOT PROVIDE REFUNDS.**
- VENDOR/APPLICANT MUST BE PRESENT FOR THE DURATION OF THE EVENT.
- THE CITY OF CHINO WILL NOT MONITOR NOR GUARANTEE EXCLUSIVITY OF MERCHANDISE SALES.
- **NO REFUNDS ON CANCELLATIONS AFTER FRIDAY, MARCH 3, 2023.**

EVENT REQUIREMENTS

- **Current City of Chino business license. BUSINESS LICENSE #** _____
 - Businesses located outside the City of Chino (who do not have a City of Chino Business License) are required to obtain a "one day" Vendor Permit.
 - One-day permits are \$13. Additional fees may be required by the City of Chino, Finance Department, Business Licensing, 909.334.3263 or buslic@cityofchino.org.
- **Seller's Permit from the State of California Board of Equalization:**
 - I hold a valid City of Chino seller's permit. **My number is: S** _____
 - My sales are exempt occasional sales, less than three times per year. *Your information will be submitted to the State of California for confirmation.*
 - Once approved, complete the attached form, return to City Hall, Business Licensing, and pay with a separate check; questions can be directed to 909.334.3263.
 For more information, contact the State Board of Equalization, Riverside Field Office:
 3737 Main Street, Suite #1000, Riverside, CA 92501; 951.680.6400 or www.boe.ca.gov.
- Cottage food vendors must provide a copy of the following:**
 - Cottage Food Health Permit from the San Bernardino County Department of Environmental Health Services.
 - Proof of \$1 Million liability insurance listing the City of Chino as an additional insured.
 - Proof of State Board of Equalization seller's permit for temporary location.

GENERAL BOOTH INFORMATION

- **Saturday** Booth set-up begins at **9:30 a.m.** Please have booth ready by **11:30 a.m.**
- **Sunday** Booth set-up begins at **8:30 a.m.** Please have booth ready by **10:30 a.m.**
- A standard 10'x10' space will be provided for participants. Registered information/retail vendors are responsible for supplying their own tables, chairs, shade, etc.
- **All vendors must bring weights to secure EZ-UPS:** _____
- Electricity will not be provided. **NO GENERATORS ARE ALLOWED.**
- Accessible routes require a minimum vertical clearance of 80" and minimum width clearance of 48".
- Any individual behaving inappropriately or unsafely will be ejected and denied future participation.
- All applications are subject to approval, and booth spaces will be assigned to vendors. Applications will be accepted on a first-come, first-served basis or until full.

PAYEE INFORMATION (if paying with check or credit card and if different than contact person at top of form)

Name Listed on Check or Credit Card _____ Primary Phone () _____
 Address _____ City _____ Zip Code _____
 Emergency Contact _____ Phone () _____ Relation _____ DOB _____

APPLICATION SUBMISSION-APPLICATIONS WILL BE ACCEPTED BY MAIL, EMAIL, OR IN-PERSON AT CAROLYN OWENS COMMUNITY CENTER.

Complete applications will be accepted **ONLY** through Friday, March 3, 2023 (or until spots are filled).

Submit complete applications to:

City of Chino, Carolyn Owen Community Center, 13201 Central Avenue, Chino, 91710

Make check/money order payable to: City of Chino

For more information or special requests/considerations, please contact:

Nicholas Gallardo, Community Services Coordinator, at **909.334.3530** or **Ngallardo@cityofchino.org**.

-Please turn over for more information-

VENDOR WAIVER

FOR PARTICIPATION IN A CITY OF CHINO SPONSORED PROGRAM AND/OR USE OF A CITY OF CHINO FACILITY

Participant Name: _____ Activity: 2023 Chino Days

Program Dates: From: Saturday, March 18, 2023 To: Sunday, March 19, 2023

In exchange for being permitted to participate in any City of Chino activity and/or use any City of Chino facility, I acknowledge and attest to the fact that:

1. My participation, and/or that of my child/children/guardians, is voluntary.
2. My participation, and/or that of my child/children/guardians, may result in injury, death, property damage, and other losses, and I assume all of those risks.
3. I am legally competent to understand and accept the associated risks.
4. I waive, and release the City, its officials, employees, and volunteers from, all claims for any injury, death, property damage, or other loss resulting from my participation in the activity, and/or that of my child/children/guardians.
5. I am responsible for payment of all fees for, and liabilities and damages resulting from, my participation in the activity and/or that of my child/children/guardians, including damages to City property, injury to other participants, or other losses of any kind.
6. I will defend the City and its representatives against any claims or lawsuits that are a result of my willful misconduct, and/or that of my child/children/guardians.
7. I agree that the City can take photographs and/or film me, and my child/children/guardians, while participating in a City activity and/or at a City facility to be used for promotional purposes; and, further that such photographs and film will be the sole property of the City and that neither I nor my child/children/guardians will be entitled to any license fee or royalty for the City's use thereof.
8. I understand that rates, fees, dates, times, classes, schedule of classes, and instructors established by the City may change at any time without notice.
9. I agree that City fliers and class schedules are not an expressed and implied contract.
10. I agree that the City is not responsible for any damage or loss that may arise from a misunderstanding, error, or omission related to the activity.
11. I understand that the City reserves the right to change or cancel any or all of the participation/use of rules at any time.
12. I understand that any individual behaving inappropriately or unsafely will be ejected and denied future participation.
13. The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. Although the City is following recommended steps by County health officials, the City cannot protect participants and their family against all possible risks of COVID-19. I understand and acknowledge that participants are encouraged to wash their hands frequently and must take all necessary steps to protect their health consistent with federal, state, and county public health guidelines. By participating in the activity, potentially being exposed to others who might have COVID-19, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child or children and I may be exposed to or infected by COVID-19 and that such exposure or infection may result in personal injury, illness, permanent disability, and death.

I am signing a full release of any and all liability against the City of Chino and do so of my own free will.

Printed Name: _____ Parent/Guardian

Signature: _____ Date: _____

Address: _____

Phone (day): _____ Phone (evening): _____ Phone (cell): _____

Organization (if any): _____

***** **FOR OFFICE USE ONLY** *****

Staff member printed name: _____ Date: _____

(Please print clearly or type)

Description of booth activity:
