



# VENDOR APPLICATION

FIRST ANNUAL BAY AREA LATIN JAZZ FESTIVAL  
SATURDAY, AUGUST 17, 2019 – 10:00 A.M. TO 6:00 P.M.  
WWW.BAYAREALATINJAZZFESTIVAL.COM

Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Quantity	Description of Vendor Space	Registration (10' x 10' booth) *	Total
	10' x 10' Food/Beverage **	\$150.00	
	10' x 10' Corporation	\$175.00	
	10' x 10' City/County Agency	\$175.00	
	10' x 10' Small Business	\$125.00	
	10' x 10' Arts & Crafts Vendor	\$125.00	
	10' x 10' Non-profit Organization	\$100.00	

\* The 10' x 10' vendor space. Booth, table, and chairs not included / \*\* Alameda County Food permit, not included

Generators must be located directly behind the booth. Event hours are 10:00 A.M. to 6:00 P.M. Set up begins at 7:00 A.M. All vendors are expected to be ready by 9:45 A.M. No tear-downs until after 6:00 P.M. All vehicles must be in parking lots. Please clean up your area once you are finished, and ask for information about grease disposal areas

Total number of spaces requested: \_\_\_\_\_ Amount enclosed: \$ \_\_\_\_\_

Please provide vendor description (food, corporation, city agency, small business, arts and crafts, non-profit):

\_\_\_\_\_

### Credit Card Payment:

Credit Card Number: \_\_\_\_\_ / Exp. Date: \_\_\_\_\_ / CVV: \_\_\_\_\_

Billing address: Street: \_\_\_\_\_ / City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Liability Release:

I hereby release Montuno Productions and HARD, their Officers, Directors, Agents, Representatives, employees, or anyone connected with management or presentation of this event, of any form of known or unknown damages, injuries, losses, judgment and/or claims from any cause that may be suffered by any entrant to his or her person or property from any and all liability and personal or public property damage resulting from my participation in the event known as The First Annual Bay Area Latin Jazz Festival.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FAX FORM TO: (510) 372-0248** / Email: [contact@montunoproductions.com](mailto:contact@montunoproductions.com) / Info: (510) 586-3215