



PO Box 9 Simi Valley, CA 93062

Tax ID# 77-0311172

501 (c) 3 #C1707279

SIMI VALLEY DAYS
MERCHANT APPLICATION

Thank you for your interest in Simi Valley Days! Every September thousands of Simi Valley residents attend this event to celebrate our great city! This year we are, once again, very excited to call the Simi Valley Town Center (S.V.T.C.) our home. The event will run from Thursday September 12th until Sunday September 15th, 2019. Our merchant area will only be open on Friday, Saturday and Sunday.

To become a part of this event please complete all the information on the following pages and return it to the Simi Valley Days Foundation for processing. We would also like to welcome you to participate in our annual parade that will take place on Saturday September 15th in front of the Town Center. This is a great opportunity to promote your business in front of approx 5000 people. We also have Official Banners and openings for event sponsors, if you are interested in either of these please contact Nacho at 805-583-0084.

APPLICATION CHECKLIST

- ← _____ COMPLETED & SIGNED APPLICATION
- ← _____ COMPLETED & SIGNED HOLD HARMLESS
- ← _____ INSURANCE CERTIFICATES (SVD Foundation and S.V.T.C.)
- ← _____ MERCHANT FEE
- ← _____ SIGNED / INITIAL MERCHANT RULES
- ← _____ CALIFORNIA SELLERS PERMIT

CONTACT INFORMATION

ADDRESS: SIMI VALLEY DAYS FOUNDATION

ATTN: MERCHANTS

P.O. BOX 9

SIMI VALLEY, CA 93062

EMAIL: ang@digitallint.com

WEB: www.simivalleydays.org

<<<<< DEADLINE September 1, 2019 >>>>>

**THIS COMPLETE APPLICATION, ALL INSURANCE DOCUMENTS AND ALL PAYMENTS
MUST BE COMPLETED AND PROCESSED BY THE DEADLINE IN ORDER TO PARTICIPATE.**



SIMI VALLEY MERCHANT APPLICATION / RULES
(PLEASE INITIAL ON EACH LINE)

Our Merchants will be located inside the fairgrounds, inside the vacant Macy's building (with a few exceptions). Additional spaces will be provided within the fairgrounds for oversized merchants and sponsors.

Each Merchant will ONLY be provided with a 10' x 10' space. Parking is limited at the S.V.T.C.

_____ Merchants will be responsible for providing their own table(s), chairs, extension cords, etc... Only the space will be provided.

The fee for each **Merchant space is \$175.00**. There are no discounts for multiple spaces. There are no "Premium" spaces provided. All "Spaces" are considered equal in value.

_____ Each "Space" will be marked and numbered. Please set up within the area provided ONLY.

_____ There is no foul weather guarantee. Our event will go on rain or shine and no refunds, discounts or any other offers will be available in the event of foul weather.

_____ The grounds at the S.V.T.C. are enclosed with security gates, fencing, etc.. the S.V.T.C. will have uniformed security personnel patrolling the merchant area during the event and after closing. You are advised to secure any supplies, materials, product, etc.. that you do not want to put at risk upon closing each night. You may leave these items within your booth covered or boxed, but it will be at your own risk. Neither the S.V.T.C. nor the Simi Valley Days Foundation accepts any responsibility for lost or stolen items.

_____ You will not be able to "Drive On" to set up your "Space". You will be required to move your equipment and supplies to your "Space" on your own. Please bring the proper equipment, hand carts, etc.. to load in, set up and break down your "Space".

_____ All marketing materials and samples may **ONLY** be offered within your "Space", Merchants may not distribute such items outside of their "Space". You will be asked to leave without a refund.

_____ Retail Exhibitors must provide a valid California Sellers Permit/City of Simi Valley Business Tax Receipt with their application.

_____ There is NO space sharing allowed. Only one Merchant per "Space".



_____ Your space must be left clean, in the same condition it was provided to you.

The operating hours for our Merchants are as follows:

Friday September 13, 2019 from 5:00 pm to 9:00 pm

Saturday September 14, 2019 from 12:00 pm to 10:00 pm (Fair closes at 11:00 pm)

Sunday September 15, 2019 from 12:00 pm to 9:00 pm (Fair closes at 10:00 pm)

_____ On September 7th between 10am and 4pm our Merchant Committee will have a "Check In" meeting in the Community Room at the S.V.T.C. A qualified representative is **REQUIRED** to attend this meeting. If you do not attend this meeting you will not be able to participate and no refunds will be provided. At this meeting our staff will perform a final check on all documentation and payments. We will also provide you with the logistical information you will need to; park, drop off, set up, pack up and operate. This meeting is **very** important to your success.

_____ S.V.T.C has the final say on any and all Merchants who participate in the event.

By my signature below I agree to the Terms and Conditions of this Merchant Application. I also acknowledge that I am authorized to sign this agreement.

Signature: _____ Name: _____ Date: _____

ORGANIZATION / BUSINESS INFORMATION

ORGANIZATION NAME _____

ORGANIZATION ADDRESS _____

PRIMARY CONTACT PHONE _____ EMAIL ADDRESS _____

TYPE OF ORGANIZATION _____

PRODUCTS OR SERVICES OFFERED _____

OF SPACES _____ TOTAL FEE \$ _____

DO YOU WANT INFO ON PARADE ? _____

WOULD YOU LIKE TO BE A SPONSOR OR BUY A BANNER? _____



MERCHANT INSURANCE REQUIREMENTS

All organizations, businesses, individuals and any other entity participating in the Simi Valley Days must provide proof of insurance to the Simi Valley Days Foundation along with this complete application package. The Certificate of Insurance must name "The Simi Valley Days Foundation, Inc., P.O. Box 9, Simi Valley, Ca, 93062" and the Simi Valley Town Center (see attached for details) as Additional Insured.

Participants also have the option to be included in the general liability policy for the Simi Valley Days Foundation. If you wish to be included in this policy, please complete the information below. Premium is for September 13, 14 & 15, 2019 only.

Your Certificate of General Liability Insurance shall be as follow (at a minimum); General Liability written through an insurer rated A+ (or better) by the Best's Rating Guide or a California admitted Insurer with limits of liability not less than \$1,000,000.00 per person / \$1,000,000.00 per occurrence for Bodily Injury and \$1,000,000.00 Property Damage limit or \$1,000,000.00 Combined Single Limit of Bodily Injury and Property Damage.

By my signature below I agree to comply with all the insurance requirements for the Simi Valley Days event.

Signature: _____ Name: _____ Date: _____

All Merchant's are still required to provide Worker's Compensation insurance protecting the Merchant's employees as required by the State of California.

MERCHANT INSURANCE APPLICATION

Organization: _____

Contact Name: _____

Address: _____ Phone #: _____

Simi Tax ID#: _____ Incorporated: YES / NO

Number of booth(s): _____ Type of Business: _____

of Paid Employees: _____ Estimated Gross income for the event: \$ _____

Do you carry Worker's Compensation insurance: YES / NO Carrier: _____

Do you use chemicals, compressed gas or flammable substances? YES / NO

If, YES, please explain: _____

Will you have a fire extinguisher on hand during the event? YES / NO

Signature: _____ Name: _____ Date: _____



HOLD HARMLESS AGREEMENT

All Merchants / Participants agree to "Hold Harmless" the Simi Valley Days Foundation and all its officers / agents from any and all loss or liability resulting at any time from injury to or the death of any person or persons and/or omission or yours, your agents, employees and/or patrons, or any damage to property owned in care, custody and control, or resulting from non-compliance with any law, ordinance, or regulation regarding the condition or use of your operation, and to indemnify Simi Valley Days Foundation and its officers / agents as to all costs, expenses, damages including reasonable attorney fees relating to your operation at said event.

Under no circumstances will Simi Valley Days Foundation assume liability for any vendor, exhibitor, participant or volunteer without prior written approval from the Simi Valley Days Foundation's Insurer.

By my signature below I agree to the "Hold Harmless" agreement above. I also acknowledge that I am authorized to sign this agreement.

Signature: _____ Name: _____ Date: _____