



Ladysmith Celebrations Society
Box 1273,
Ladysmith, BC V9G 1A9

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www.ladysmithdays.com

Contact: Mary Furneaux,
Vendor Coordinator at
events@ladysmithdays.com or
mdfurneaux@shaw.ca

FOOD VENDOR CONTRACT-2018

This Contract is Between: LADYSMITH
CELEBRATIONS SOCIETY
(hereafter called the Contractor)

AND

THE FOOD VENDOR:
(hereafter called the Vendor)

August 4, 12:00 pm - 8:00 pm & August 5, 10:00 am - 10:30 pm at Transfer Beach

The Contractor agrees to supply a suitable area for the vendor to set up his/her food booth.

The Contractor agrees to supply power if required and requested prior to the event.
Power Required _____

The Contractor will promote the event to the best of his/her ability to ensure the best possible attendance at the event.

The Vendor will supply a **current Health Certificate** to the Contractor and the Town of Ladysmith. **Please attach to contract.**

The Vendor will carry a minimum of \$2,000,000.00 liability insurance. He/She will co-insure Ladysmith Celebrations Society and the Town of Ladysmith. **A copy of the insurance policy must be supplied** to the Contractor Prior to the Date of the Event. This applies to any vendors who sell items that could be considered hazardous in anyway. **Please attach to contract.**

The Food Vendor will supply an itemized menu and **will endeavour to not duplicate any of the items sold by other food vendors** at the event. This will not include beverages.

The vendor agrees not to undersell any other vendor at the event. The prices must be the same or higher not lower. **Please attach menu to contract.**

The Vendor agrees to pay \$100.00 for both days, and/or \$25.00 for Saturday, \$100.00 for Sunday for the right to attend the above named event. This amount will be included with this contract and must be paid by **June 30, 2018.**

Cancellation of this contract and to receive a full refund less 10% must be made in writing by **July 15/18** or by contacting the coordinator.

Failure to comply with the above conditions could void this Contract and the Vendor will be asked to vacate the premises and/or not asked back to future events.

This Contract is void if any of the conditions are not met. This Contract is completed when the above mentioned event is completed for the current year.

Signed on Behalf of the Contractor:

Signed on Behalf of the Vendor:

Date: _____

Your contact info: Name: _____

Phone#: _____ Cell#: _____

Email: _____

Did you remember to include with your contract:

- **Waiver**
- **VIHA Certificate**
- **Copy of Insurance**
- **Cheque (Please make cheques out and mail with paperwork to the address above)**

Thank you for participating in our event-have a great time!