

Present

12th Annual Healthy Melrose Family Wellness & Fitness Fair



Vendor Application

Saturday, May 9, 2020 10:00-1:30 PM

Melrose Middle School Athletic Complex (Plan A). Please Note: In the case of inclement weather Plan B will be executed and event will be held inside the Middle School with a 24 hour advance notice.

- Please check if you are a food vendor that will be attending Healthy Melrose, complete the entire application.
 - Please check if you are a food vendor that will be sending free samples only and will not be present at Healthy Melrose. Please fill out organization Information section only. Thank you.
 - Please check that you have signed the workmans comp form attached.
 - Food Vendors only: Please check that you have answered the Melrose Health Department food vendor questionnaire attached. Note: ALL permit fees are waived for this event.
- If you have any questions please contact the Health Department Health@cityofmelrose.org or 781.979.4130

Pre registration option (return vendors) must be in by February 28, 2020 to secure a space, after this date first come first serve for new applicants: All applicants submitting an application after this date will result in a \$25.00 fee.

- Vendor Fee =\$150.00
- Additional Space + \$125.00
- Late Fee if returning after February 28, 2020 +\$25.00

Total Amount Enclosed

\$

- Please check this box if you are a member of Sustainable Melrose.
- Please check that you have read the vendor criteria and you fit the mission of Healthy Melrose.

Please include your check made payable to the City of Melrose and send your application with payment to Jenine Wright at fit life 22 Corey Street Melrose MA (contact: Jenine.wright@gmail.com 781.858.6117).

The Healthy Melrose Family Wellness & Fitness Fair Committee reserves the right to choose all vendors. Vendors must fall within the criteria set by the committee and abide by the criteria and guidelines listed. All vendors will be notified as soon as possible if their application has not been accepted.

We will continue to accept applications until March 31, 2020, applications will be accepted after March 30, 2020 on a space availability basis only.

Organization Information

Organization Name:

Type of Business:

Contact Person:

Phone Number:

Email address:

Address:

***PLEASE arrive approximately 1 – 1.5 hours prior to allow for set up time and plan on staying the entire event.
PLEASE DO NOT PLAN ON BREAKING DOWN UNTIL THE END OF THE EVENT**

SERVICE DESCRIPTION Describe your booth or display – be brief, yet specific. This information will be included in our marketing: including social media, website and print. **PLEASE include what handouts, correspondence or any samples you plan on distributing the day of the event.**

FACILITY NEEDS Vendors will be supplied with one (1) dressed eight-foot (8') table and two (2) chairs and ALL spaces will be provided a canopy. Please check any additional services and the amount you will need: This is your allotted space, if you need additional space you may require 2 spaces and will be charged accordingly, please advise if you do not wish to have a table in your approx 8 ft space. If you will need electric outlets please be advised that NO extension cords will be available and you will need to supply your own, every effort will be made to put you close enough to the outlets as space permits.

_____ Electrical Outlets

_____ Other (Please specify) _____

Will you be providing any samples or free giveaways at your table?

Will you be selling any products or services? (there must be a "Healthy Melrose discount" in order to sell at the event.)

Committee use only

Accepted:

Comments:

Paid:

Notified:

Table #:

Thank you for your participation in such an important event!

