



VENDOR BOOTH APPLICATION

"A World Where Deaf People Can Sign Anywhere!"

SEPTEMBER 20, 2025

NAME OF ORGANIZATION

EIN/TAX ID

CONTACT PERSON

POSITION

- ☐ VP
☐ PHONE
☐ TEXT

ADDRESS/CITY/ZIP

EMAIL

DeaFestival fee may be waived or reduced for **qualified non-profit organization** that demonstrate the operations especially target and benefit the Deaf and Hard of Hearing community in Riverside and its surrounding areas, and will not sell anything at DeaFestival-Riverside. Will process to DeaFestival committee for an approval.

NOTE: Some vendors are required by the City to carry general liability Insurance. Please attach the copy with this application.

VENDOR FEE: **\$100.00** **TABLE and TWO CHAIRS will be INCLUDED!** Bring your OWN CANOPY (10'X10') THIS IS YOUR STANDARD SPACE. IF YOU WISH FOR DOUBLE-SPACE, CHECK THE BOX FOR TWO.

TYPES OF VENDOR:

- ☐ NON-PROFIT ORGANIZATION
☐ FOR-PROFIT BUSINESS
☐ EXTRA SPACE- will charge extra (add \$100.00)
☐ ELECTRICITY

- ☐ CLOTHING
☐ BOOKS
☐ ART/CRAFTS
☐ RELIGION
☐ SCHOOL/UNIVERSITY
☐ INFORMATION
☐ FOOD**
☐ OTHER: _____

****MUST HAVE RIVERSIDE COUNTY FOOD PERMIT.
(CONTACT MIKE ANDERSON)**

THE WAIVER FEE MAY TAKE 5-7 BUSINESS DAYS TO APPROVE. PLEASE SUBMIT BY **AUGUST 20, 2025** TO ENCORE ENOUGH TIME FOR THE REVIEW PROCESS. THE VENDOR COORDINATORS WILL BE IN TOUCH WITH YOU ONCE THEY PROCESS YOUR APPLICATION. THANK YOU.

MAKE A PAYABLE TO:

MAIL A COMPLETED APPLICATION, INCLUDED
LIABILITY INSURANCE AND/OR FOOD PERMIT

DEAF COMMUNITY OF RIVERSIDE

Email DeaFestival@deafcommunityofRiverside.org

Zelle Treasurer@deafcommunityofriverside.org

DEAFESTIVAL 2025

PO BOX 2524

RIVERSIDE, CALIFORNIA 92515

QUESTIONS? DEAFESTIVAL@DEAFCOMMUNITYOFRIVERSIDE.ORG