



Winery Participation Agreement

Deadline for Registration: May 10, 2026 (Or until full)

Please let us know whether you are or are not going to participate by scanning and mailing this form to Tim@thebowersgrp.com with the appropriate boxes completed, or return by mail with your check. Thank you.

_____ Yes, I will participate in the Boulder Valley Wine Festival , at the new location on North Harrison Avenue in downtown Lafayette, CO, on Saturday May 30th, 2026. All vendors need to be set up by 10:00 AM Saturday, May 30th. Festival hours 11:00AM – 5:00 PM *All Wineries and vendors are required to stay for the duration of the festival!*

_____ No, I am unable to participate in the Boulder Valley Wine Festival 2026 (Please keep me in mind for next year or other festivals)

Please provide the following information, some of which will be used in Wine Festival brochures, website, maps.

• Winery Name _____

Contact Name _____

• Mailing Address

• City, State, Zip Code _____

• Phone () _____ Cell # () _____

• Website _____

• Directions to your winery (or tasting room)

Your email address (Not for publication) _____

*****MUST HAVE: Winery License #** _____

*****MUST HAVE: Multi Event Sales Tax #** _____

- ***Vendor needs to have proper insurance and must provide a copy of its policy or certificate showing necessary coverage. ****

** NOTE: Retail Vendors are required to have minimum insurance coverage in effect that covers the Vendor's booth operations. Please attach copy of declaration page showing valid comprehensive general liability coverage at a minimum of \$1,000,000 policy limits per occurrence for Bodily Injury and Property Damage, and an aggregate limit of at least \$2,000,000 CSL. Policy shall reflect coverage for Premises/Operation and Products Liability). The Policy shall name the Town of Lafayette, Co, The Boulder Valley Wine Festival and The Bowers Group LLC as additional insured's for the term of the event. You must have proof of insurance.*

____ I will submit by May 15th, 2026, an e-file of my mailing list for one time use in the brochure mailing if applicable.

____ I will apply for a Boulder County Health Dept. license if I plan on serving or selling food

____ My Tasting Room will be open on Sunday, May 31st from _____

____ \$50.00 for 10 ft X 10 ft Booth Space (**All tents need to be secured, no stakes**)

____ **\$200.00 DEPOSIT, WILL BE RETURNED WHEN SET UP *** (If you have a deposit on file, you do not need to send another one.)**

____ \$50.00 for additional 10 ft x 10 ft booth space \$ _____

____ Must provide own electricity!

TOTAL \$ _____

Payment: Check # _____

Signature (all wineries must sign agreement) _____

Return or scan and email to: Boulder Valley Wine Festival

Attn: Tim Bowers

PO Box 206, Windsor, CO 80550

Phone: 970-218-4545 (Tim)

Email Tim with questions or comments: Tim@thebowersgrp.com