



**Saturday, September 26th, 2009
10am-6pm**

Participant Application

Please read these instructions carefully.

Participant or Vendor Name: _____

Address: _____

City, State: _____ Zip: _____

Business Phone: _____ Fax: _____

Contact Name: _____ Cell Phone _____

Email Address: _____ Website: _____

Resale number: _____

IF a Non-Profit Corporation 501c please list Corp # _____

Type of Booth Desired: Retail Exhibitor

Type of Products Sold: _____

Type of Exhibit: _____

Special Needs: i.e. electricity, earlier set-up, etc) _____

Set-Up will take place the morning of the festival from 7:30am. All set-up should be completed by 9:30am. For Vendor Parking, Break-down and Set-up instructions: please see Vendor Checklist. Your Section Leader will be in touch with you if you are selected to participate!

GENERAL POLICIES

- Fees will be decided according to the Spirit of Japantown Festival organizing body.
- All rental equipment will be charged according to Spirit costs for equipment rental and labor.
- Organizations participating in the Spirit of Japantown Festival 2009 will have their booth space fees waived if they are occupying their own property. This also applies to organizations affiliated with those properties (such as Lotus Preschool on San Jose Buddhist Church Betsuin property) if the organization is an active participant in the Spirit of Japantown Festival.
- Fee waivers and refunds are granted according to emergency circumstances or errors in accounting or fee collection by the Treasurer and Spirit of Japantown Organizers.
- ECO-FRIENDLY We ask that you consider the environment when making your Food Packaging & Serving choices! Any non-coated paper products are compostable and acceptable by Festival standards. If it has to be plastic, Recyclable plastic (#1 or #2 plastics) are our choices.

Mailing address:

Spirit of Japantown Festival (*please make checks payable to 'Spirit of Japantown Festival'*)
Japantown Community Congress of San Jose
588 N. Fourth Street, San Jose, CA 95112

Spirit of Japantown Festival
588 North Fourth Street, San Jose, CA 95112
www.spiritofjapantownfestival.com



BOOTH PRICING: Please check one. If more than one space is required, please indicate number of booth spaces requested. Festival insurance is covered in all categories.
Additional Booth Costs: 10% of Gross Sales collected at the end of the event.

Please write in the number of items of each type that you are requesting:

___ \$135 commercial space

___ \$75 non-profit space

___ \$35 non-profit Kids Zone space (determined by committee review)

___ **Government Agency Space Only (no fee)** - applies to government agencies or departments.
All rental equipment will be charged at standard Festival rates.

___ \$150 canopy or wooden booth

___ \$180 wooden food booth (with screens)-cooking booths will be placed on festival site with required room for cooking accommodated. Please fill out 'special needs portion of application'

___ \$ ___ Santa Clara County Environmental Health (SCCEH) temporary permit-food only

___ \$10 per table

___ \$5 per chair

___ \$25 electricity

_____ total due to "Spirit of Japantown Festival"
588 N. Fourth Street, San Jose, CA 95112

e.g.#1: One booth taking one space with canopy and two chairs no electricity = \$135 + \$150 + (\$5 x 2) = \$295 total
e.g.#2: Two booths taking two spaces with no equipment needed = (\$135 x 2) = \$270 total
e.g.#3: One non-profit food booth (renting from Spirit of Japantown Festival) taking one space in Kids Zone = \$35 + \$180 + Env. Health permit = \$215 + Environmental Health permit.
e.g.#4: One commercial space in Kids Zone two tables = \$135 + (\$10 x 2) = \$155

-All Street Sales will be covered under the Spirit of Japantown Festival Street Permit and will be considered a participant of the festival and therefore required to pay the participation fees and 10% of gross sales.

-All fees are non-refundable.

-Deadline for Original Arts & Crafts is July 31st, 2009 - juried review for acceptance

-Deadline for all other booths is August 31st, 2009

All Booths must apply for entry by submitting a list of items to be sold with a close-up photograph of the merchandise and another photograph of the display. Final decisions are determined by the Spirit of Japantown Festival Committee and Section Leaders.

Participants will be notified of acceptance. Thank you for applying!

QUESTIONS? Please email or call:

Spirit of Japantown Festival Committee
sanjosejatown@sbcglobal.net Phone (408) 298-4303 office

Spirit of Japantown Festival
588 North Fourth Street, San Jose, CA 95112
www.spiritofjapantownfestival.com



Spirit of Japantown Festival 2009

PARTICIPATION RELEASE FORM

Please read, sign, date and send with:

- 1. Your Vendor Agreement*
- 2. Your check made out to 'Spirit of Japantown Festival' and*
- 3. Your completed participation form.*

As a participant of the Spirit of Japantown event, I agree to hereby hold harmless the organizers, volunteers, and participants of the Spirit of Japantown event and Japantown Community Congress of San Jose from any claims of loss and/or harm regarding same event. I agree to abide by all standards, rules and procedures set forth by organizers of same event.

Financial

I also understand that I am responsible for paying booth fees and 10% of gross sales to the Japantown Community Congress of San Jose. Entering my signature below, I hereby allow photo rights of participation in the Spirit of Japantown event to be used in any publicity.

Furthermore, by entering my signature below, I understand and acknowledge that Pre-Registration is non-refundable.

Agreement

I understand and accept all rules and claim by my submission that the information is correct and understand that any false information may jeopardize my eligibility to participate in the event.

Signature

Date



APPLICATION TO OPERATE A TEMPORARY FOOD FACILITY

Complete BOTH sides of this form and return it WITH applicable fees and additional documentation to your Event Coordinator.
All applications and fees must be submitted to this department by the Event Coordinator.

Note: All forms and applications are available at www.ehinfo.org > Consumer Protection Division > Temporary Events or at our office.

IMPORTANT NOTICE: Completed applications MUST be SUBMITTED AT LEAST 2 WEEKS PRIOR TO THE EVENT. Incomplete applications or those submitted after the deadline may not be approved; if approved, the menu may be restricted. Once the application is approved, NO changes may be made without approval of this Department. Unauthorized changes may result in permit suspension.

BUSINESS INFORMATION		EVENT INFORMATION	
Business Name / DBA		Event Name	
Care Of Name or Owner Name		Event Location	
Address		Event Address	
City and Zip Code		City and Zip Code	
Owner Phone	Vendor Number: FA	Event Date(s)	Event Time(s)
Owner Cell Phone	Fax	Event Date(s)	Event Time(s)
For Non-Profits: Tax ID#		Event Date(s)	Event Time(s)
E-mail Address		Event Organizer Name and Phone	
TEMPORARY FOOD FACILITY (BOOTH) INFORMATION		ADVANCE PREPARATION / COMMISSARY AGREEMENT (IF APPLICABLE)	
Facility Status: <input type="checkbox"/> Profit <input type="checkbox"/> Non-Profit (submit DEH Non-Profit Declaration Form) <input type="checkbox"/> Annual Temporary Event Permit Holder <input type="checkbox"/> Veteran (submit copy of Honorable Discharge, DD214)		Facility Type: <input type="checkbox"/> Booth <input type="checkbox"/> Indoor Event <input type="checkbox"/> Food Vehicle <input type="checkbox"/> Cart	
Name of Temporary Food Facility		Home Stored or Home Prepared Foods are Not Allowed! If your organization does not have its own permitted kitchen or commissary facility, you must obtain permission to use a kitchen or commissary facility which has been approved in advance by the local department of environmental health, or obtain prepared foods from an approved source. NOTE that pre-event food preparation inspections may be required. Have copies of food invoices/receipts at your booth, available for review upon request by the Specialist.	
Person in Charge Day of Event			
Person in Charge Cell Phone			
<input type="checkbox"/> Food Sampling only, NO FOOD SALES		City	Phone #
Food Booth Set-Up Time		Date(s) and Time(s) of Pre-Event Use	
BOOTH DESIGN AND CONSTRUCTION		<input type="checkbox"/> Valid Health Permit in Santa Clara County? Facility #: <input type="checkbox"/> Facility is permitted outside Santa Clara County (submit a copy of Valid Health Permit).	
Overhead Covering: <input type="checkbox"/> Canvas <input type="checkbox"/> Wood <input type="checkbox"/> Other		The Applicant submitting this application has permission to use the facility listed above for the specified date(s) and time(s). If this permission is rescinded, I will immediately notify the County of Santa Clara, Department of Environmental Health (408-918-3400).	
Floor: <input type="checkbox"/> Asphalt <input type="checkbox"/> Concrete <input type="checkbox"/> Wood <input type="checkbox"/> Indoor Event <input type="checkbox"/> Other (Note: Grass or Dirt surfaces must be covered with approved tarps or plywood.)			
Walls: <input type="checkbox"/> Screens <input type="checkbox"/> Canvas <input type="checkbox"/> Wood <input type="checkbox"/> Indoor Event <input type="checkbox"/> Other (Note: Enclosed food booth required if open foods are handled.)			
Booth Rental Company		Name of Permit Holder or Authorized Kitchen Representative Signature _____ Date _____	

The undersigned hereby applies for a Permit to Operate and agrees to operate in accordance with all applicable state and local regulations, laws, and such inspection procedures necessary to ensure compliance. Additionally, the undersigned is aware that non-compliance may result in closure of the temporary food facility. Re-inspections may be subject to additional fees.

I have read and understand the Requirements for Temporary Food Facilities in the County of Santa Clara and hereby agree to adhere to the requirements.

Payment of the required fee to secure a valid permit is required before commencing or continuing operations. Failure to do so may result in a misdemeanor citation, permit suspension/revocation proceeding, and/or closure.

Applicant Signature _____ Print Name _____ Date _____

Office Use Only	OW#	AR#	FA#	EV#	Menu Type
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