



COLD CREEK MAPLE SYRUP FEST

CALLING ALL ARTISANS, CRAFTERS, AND RESTAURANTS!!

Join in the family fun and festivities at the Annual Cold Creek Maple Syrup Fest. Enjoy pancakes with maple syrup and other local foods, outdoor activities and support your community. We hope you will join us.

To ensure there is much to see and do at Maple Syrup Fest, we are inviting a wide variety of artisans, crafters, and restaurants to join us for the day. What a great way to interact with potential customers while they enjoy maple syrup themed activities! Expected attendance at this event is well over 500 throughout the day(as per previous years). Vendors will receive a 10x10 area to showcase and sell their products. Vendor's will be responsible for bringing their own tent (no bigger than 10X10) and your own table and chairs and décor.

For Profit vendors fee \$50.00 plus HST. Non-Profit vendors are free.

BENEFITS OF PARTICIPATING

- Unique event marketing opportunity to showcase your business and/or talents
- Personal interaction with event guests & attendees introduce yourself to new neighbours
- Advertising and media exposure where available

VENDOR RESPONSIBILITIES

- Set up time is 8:00-9:30am. Tear down will take place after 2:00 pm
- All vendors are expected to provide their own chairs, tables and tent
- All vendors selling food must complete a copy of the Vendors Application form from York Region Public Health.
- Prices should be fair market value. Cooperation, not competition, is encouraged at our event.
- Maintaining a clean and tidy area throughout the day- leaving a clean area at the end of the event
- Please dress for the weather, this is an outdoor event.





XING COLD CREEK MAPLE SYRUP FEST

Thank you for your interest in being a vendor at the 2023 Maple Syrup Fest. Kindly take a few minutes to complete the Vendor Form. Please send your completed form to events@king.ca. We will advise you where your area will be located and other logistical details closer to the event date.

Contact Name:	Business Name:
Address:	
	Postal Code:
Email:	Phone Number:
Category: (Select most applicable) Busin	ess/For-Profit Non-Profit/Charitable
Details about your vendor space (i.e. what v	will you be selling/showcasing):
,	3
-	
-	
At my booth, the following payment options	s are available: Debit Credit Cash
Payment:	
For Profit Vendors must pay \$50.00 plus HST for a 10'X contact Angela Webster for set up details - additional fe	
Payment Method:	
Online (Credit Card) * if selected, staff will follow up for	next steps
Cheque	
** Cheques must be made payable to**	
Township of King Attn: Angela Webster	

Cold Creek Maple Syrup Fest Saturday March 11th Cold Creek Conservation Area

2585 King Road King City, ON L7B 1A1



COLD CREEK MAPLE SYRUP FEST

Vendor Agreement/Release and Waiver Form ATTENTION: PLEASE READ THE FOLLOWING CAREFULLY

(If you are under 18 years of age, a parent/guardian signature is required)

I, by signing below, in participating in the Cold Creek Maple Syrup Fest, and in consideration of the organizing stakeholders and the Township of King (the "Township") allowing me to participate in this event and related activities, fully understand and agree to the following:

- 1. I will not be considered to be an employee or independent contractor.
- 2. No fee, payment, salary, wage or employee benefits (such as accident, disability, medical, dental or other insurance coverage) whatsoever will be paid to me and I will not be covered by Workplace Safety Insurance Board coverage.
- 3. I acknowledge that vendor activities may involve certain elements of risk or the chance of an accident and I hereby release the event stakeholders, the Town and its elected officials, officers, employees and agents and their respective successors, assigns, heirs, and executors from all claims for loss, damage, or injury, except for that which is caused solely by the negligence of the Township, its employees, or its agents.
- 4. I will abide by all Cold Creek Maple Syrup Fest applicable policies and rules as may be amended from time to time and will follow all instructions of the appropriate event management staff in carrying out activities.
- 5. I will not use facilities, equipment and property without the approval of an event management staff.
- 6. I will not use facilities, equipment and property owned or rented by Cold Creek Maple Syrup Fest organizers or by the Township for personal purposes.
- 7. I will immediately notify the appropriate event management staff of any incident that involves property damage or personal injury to me or any other person during my participation in event activities.
- 8. I hereby give my permission to the Township of King for the use of my picture, taken by a photographer employed by or volunteering for the event in any promotional material including advertising, brochures, publications, website, video productions and other uses.
- 9. I waive the right to any fee or compensation for either the photographic setting or the use or reproduction of any resulting photographs.
- 10. I understand that these materials may be used by the event stakeholders or its agents, sponsors or partners.
- 11. I shall comply with all applicable provincial orders and directives, guidelines of public health authorities for the Province of Ontario and York Region Public Health, and, if applicable, return to sport protocols and guidance issued by the Permit Holder's national sport organization and provincial sport organization.

By signing this form:

- I acknowledge that I have read and understood the preceding conditions, release, and waiver; and
- I agree to the preceding conditions, release, and waiver.
- I have been provided this document in advance and have had the opportunity to review and obtain independent legal advice on the terms and have asked any clarification questions I may have.

If the vendor is under the age of 18, by signing this form as a parent or guardian:

- I acknowledge that I have read and understood the preceding conditions, release, and waiver; and
- I agree to the preceding conditions, release, and waiver as they apply to my child.
- I have given permission for my child to participate as a vendor in the event listed above.

Print Name:	Signature of Vendor:
Date:	
For Vendors Aged 14 to 17 years:	
Print Name:	Signature of Vendor:
Date:	

The personal information contained on this form is collected pursuant to the Municipal Freedom of Information and Protection of Privacy Act (28-2) and will be solely used for the Township operational and promotional activities. Any questions regarding the collection, use or disclosure of information should be forwarded to the Clerks Department at the Township of King, 2585 King Rd / King City, ON / L7B 1A1 / 905 833 5321.