



HISTORIC SOCIETY of STILLWATER TOWNSHIP
ANNUAL STILLWATER FALL FESTIVAL
 Stillwater Elementary School 904 Stillwater Rd
 11:00 am ~ 4:30 pm

Supply Insurance Event Coverage or Fill out below
Facility & Equipment Use/Hold Harmless Agreement

For and in consideration of Stillwater Twp. School (STS) and the Historical Society of Stillwater Township (HSST) in the County of Sussex and the State of New Jersey, permitting us, the undersigned, to use the facilities and/or equipment at Stillwater School, located at 904 Stillwater Road (Rt. 521). We hereby agree to protect, indemnify and save harmless STS and/or HSST for any and all claims, suits, liabilities, litigation or proceedings of any kind or nature, against STS and/or HSST for theft, injury or damage whether alleged or sustained by any person, firm or corporation arising out of the use of said premises, facility or equipment, and we further agree to indemnify STS and/or HSST from and against all cost, counsel fees, expressed liabilities, awards or judgments incurred as a result of any such claims for any actions or proceedings brought thereon. (Consult Homeowner's Insurance).

Vendor Name: _____
 Business Name: _____
 Address: _____
 Phone: _____ E-mail address: _____

Merchandise: _____

Space size may change if event is moved due to weather conditions. I understand and agree to the above and the compliances section of this agreement.

Vendor/Guest (Print)	Vendor/Guest Signature	Date

Please return completed form with check made to **HSST** and mail to:
 HSST, PO Box 238, Stillwater NJ 07875
 Visit: www.historicstillwater.org

FOR COMMITTEE USE ONLY

Space # Assigned: _____

Vendor Permit Sent By: _____ Date: _____

Historical Society of Stillwater Township

Annual Stillwater Fall Festival

11:00am -4:30pm

Craft/Vendor Participation Agreement



HSST ANNUAL FALL FESTIVAL
 11:00 am ~ 4:30 pm
CRAFT/ANTIQUES VENDOR Participation Agreement

The HSST Fall Festival Committee look forward to your participation as a vendor/guest for the **Stillwater Fall Festival**. Please plan to arrive at the Stillwater School 904 Stillwater Road (Rt. 521) early at 9:00 AM to ensure your ability to set up your area before 10:30 AM. Please take a moment to review the participation agreement, then sign & return attached agreement along with your registration form (pages 3 and 4) at least 1 week prior to event. **Please include Insurance covering Stillwater Twp. School, Stillwater Historical Society** (please consult your homeowner's policy).

Mandatory Compliances:

- Vehicles need to be removed from all pedestrian areas by 10:30 AM (NO Exceptions).
- Vendor/Guest will read, sign, and return the attached Participation & Facility Use/Hold Harmless Agreement.
- Vendor/Guest must accept and use space as assigned. Vendor/Guest may not "overflow" assigned area. Vendor/Guest will display product in a way that is safe for festival attendees. Flea Market vendors may offer only new, or quality used items for sale. Please do not offer damaged items (i.e., chipped cups, stained clothing, etc.) for sale. **NO JUNK!**
- Keep in mind that this is a family event. HSST reserves the right to have objectionable items removed from vendor display (i.e., drug paraphernalia, sexually explicit/implicit materials, toy weapons, etc.) If you have a question about materials you offer for sale, please e-mail: Beth Martin: e-mail hsstbm@outlook.com
- Vendor/Guest agrees that HSST and its representatives (i.e., The Stillwater Fall Festival Committee) hold no liability for theft, damage, or loss related to items for sale before, during or after the sale of items.
- **Absolutely no unauthorized food/beverage sales will be permitted.**
- It is agreed that vendor is responsible for providing all insurance coverage needs required by the county & secure all necessary permits.
- The event will be held rain or shine. Please plan accordingly for typical fall weather changes. In the event of heavy rain, the festival will be cancelled and/or will be held the following day). **There will be no refunds (this is a non-profit organization, and you may deduct this expense on your income tax).**
- Presenter reserves the right to refuse entrance to anyone at any time and eject anyone at any time for poor behavior.
- If you would like to distribute flyers or posters on the Festival's behalf, please download flyers from our websites: www.HistoricStillwater.org

KEEP THIS PAGE FOR YOUR REFERENCE STILLWATER FF



HISTORIC SOCIETY of STILLWATER TOWNSHIP
ANNUAL STILLWATER FALL FESTIVAL
 Stillwater Elementary School 904 Stillwater Rd (Rt. 521)
 11:00 am ~ 4:30 pm
CRAFT & ANTIQUES VENDOR APPLICATION

Vendor Name: _____
 Mailing Address: _____
 Business Name: _____
 Phone# _____ Fax# _____
 E-mail: _____
 Please describe the type of merchandise you will present for sale: _____

The Stillwater Fall Festival will occur Saturday of Columbus/Indigenous Peoples weekend in October (unless otherwise stated)

Outside spaces are 10' x 10' to accommodate canopies. Vendors must supply own chairs & tables. Please check your space preference:
 _____ space (s) @ \$30/Space _____ double space @ \$50

AMOUNT ENCLOSED: \$ _____ PAYMENT TYPE: _____
 Do you have a canopy? Yes _____ Size: _____ No _____

Please note that electrical & water access will not be available; however, vendors will be permitted to bring low volume generators (if necessary). The Fall Festival begins at 11:00 AM. All participants & vendors must be totally set-up by 10:30 AM and remain set-up until 4:30 PM. Set-up will begin at 9:00 AM. Cars must be parked in the designated parking lots after unloading. The Stillwater Fall Festival is a family/community event. HSST reserves the right to restrict a participant/vendor from displaying and/or selling any item that does not conform to acceptable standards (determination made by HSST). It is agreed that there will be no refunds in any event. If you have any questions regarding this event, please contact Beth Martin: e-mail hsstbm@outlook.com

***VENDORS PLEASE MAKE STILLWATER FALL FESTIVAL CHECKS PAYABLE TO: HSST**

**Return application with Payment to:
 HSST, PO Box 238, Stillwater, NJ 07875**

PLEASE COMPLETE, SIGN + DATE

 Vendor/Guest Signature

 Date