

\_\_\_ Insurance



# Bay Point Park Non-Profit Booth Vendor Application August 2-4, 2019

Due to construction at Levee Park this year, all vendors, including Arts & Crafts, Commercial and Food Vendors will be at Bay Point Park for River City Days. Entertainment provided by Big Turn Music Fest will be in the big tent and will be extended this year until 8PM on Sunday, August 4. Also, the River City Ramble will be starting and stopping at Bay Point Park on Saturday, August 3, from 8-9:30AM. This event attracts approximately 200+ runners and their families that will be at the park early.

Business Name: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Website: \_\_\_\_\_  
Activity: \_\_\_\_\_  
Which day/s do you intend to exhibit? Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday \_\_\_\_\_

### Please complete form above and mail the following:

- ✓ Proof of insurance for current year to include dates of event.

Booth size is a 10' x 10' space. **As a non-profit organization, there is no cost to have a booth at this event. However, items cannot be sold.** Items cannot be given away if they compete with other vendors (food and/or commercial vendors, i.e., water bottles, beverages, snacks, etc.). If you wish to sell items (T-shirts, etc.), you will be billed a vendor fee of \$250 per 10' x 10' space. Also, please do not solicit funds from other businesses for River City Days. The Red Wing Area Chamber of Commerce solicits funds from area businesses to help pay for all the expenses incurred for this festival. Without the support of local businesses, River City Days would not be able to exist. If you are providing an activity at Bay Point Park, there will be no charge. Parking passes will not be distributed. Parking is available for the entire weekend for \$5.00.

**Weather:** Bring protective covering. This is an outside festival.

**Set Up Times:** Friday, August 2 9AM-1PM **(The Fire Inspector will be coming on Friday, August 2, at 11AM.**

**Please have all your electrical equipment ready for inspection by this time)**

Saturday, August 3 8-10AM

Sunday, August 4 8-10AM

**Event Times:** Friday, August 2 1-10PM  
Saturday, August 3 10AM-10PM  
Sunday, August 4 10AM-6PM

As a Vendor, you can extend your hours longer if you want, but not shorter because we publish these times as festival hours.

**Location:** Bay Point Park, 1392 Levee Road, Red Wing, MN. **Directions from the Twin Cities:** Take Hwy. 61 toward Red Wing. Turn left on County Road #1 (Bench Street), go to stop sign, turn right on Old West Main Street. Go to stop sign, turn left on Levee Road. Drive approximately 1/2 mile, Bay Park is on the left. **Directions from Winona:** Take Hwy. 61 to Broad Street (YMCA on right), turn right. Drive toward river, take left on Levee Road. Follow Levee Road approximately 1/2 mile, Bay Point Park is on the right.

Call the Park Manager, Krista Huron at 651-380-8359 for a meeting time and setup location in park on Friday. Some electricity is available but not guaranteed.

**Mail application & payment to:**

River City Days  
c/o Red Wing Area Chamber of Commerce  
439 Main Street  
Red Wing, MN 55066  
651-388-4719  
Email: [tammy@redwingchamber.com](mailto:tammy@redwingchamber.com)  
Website: [rivercitydays.org](http://rivercitydays.org)



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED	INSURER A :	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

## COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 200,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Event: River City Days, Red Wing, MN, August 2-4, 2019

The above coverages must be placed with an insurance company with an A.M. Best rating of A-:VII or better.

Please forward your certificate within 30 days of event to Tammy Wadley, Red Wing Chamber of Commerce

## CERTIFICATE HOLDER

## CANCELLATION

Red Wing Area Chamber of Commerce  
 439 Main St  
 Red Wing, MN 55066

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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