



Food Vendor Application - Carlisle Summerfair 2025

Please Print:

Business/Organization Name: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Type of Food Served: _____

Type and Size of Vehicle/Tent that will be used: _____

Facebook: _____ Website: _____

Instagram: _____

Cost: \$50 per event **Amount enclosed: \$** _____ **Check #:** _____

Events: Please check those you plan to attend:

___ Opening Ceremonies/Cheap Sneakers Concert/Kids Night – Friday, June 27th (5pm-10pm)

___ Craft Show – Saturday, June 28th (9am-3pm)

___ Jim Thorpe Track & Field Meet (6:00-8:30pm)

___ Anything Floats – Friday, July 4th (11am-1pm)

___ Harrisburg Symphony – Sunday, July 6th (5pm-10pm)

All food vendors are required to provide a Certificate of Insurance in an amount not less than \$1,000,000 each occurrence for liability coverage. This Certificate must be effective during the dates of the Summerfair event and must be returned along with the completed contract. Vendor agrees to indemnify, defend, and hold harmless, Summerfair and its' Officers and Board of Directors, from any liability including personal injury or death, that results from the Vendors operation of a food and beverage concession at the Summerfair event(s) set forth above. Insurance Certificates are to be made out to Certificate Holder (Office of the President, Dickinson College, PO Box 1773, Carlisle, Pa 17013). Vendors are requested to keep their food stand open full-time during the length of the event. Vendor agrees the assigned site shall be cleaned thoroughly and that all equipment and refuse shall be removed within an hour and a half of event ending. Carlisle Summerfair will not carry insurance or be responsible for any personal injury or financial loss of any nature. Event will be held rain or shine and is outdoors.

**Please return this application with your check or money order (payable to Carlisle Summerfair) to:
Connie Hollenbaugh, Attn: Summerfair, 3059 Spring Rd., Carlisle, Pa 17013**

I understand and accept the terms of this agreement (Signature Required)

Organization Use Only: Contract: _____ Payment: _____ Photos: _____ Insurance: _____