



Prescott Valley Chamber of Commerce

39th Annual

Prescott Valley Days

May 12-13, 2017

Non-Profit Application



Name _____ Phone # () _____

Business Name (if applicable) _____

Address _____ City _____ State _____ Zip _____

Email _____ Cell Phone () _____

Brief Description of Craft or Product _____

Registration Fee & Deadline: \$50 for single booth and \$100 for double booth. All applications must be received by **April 14, 2017**

Special Event Fee: Proof of 501c3 status is required.

Space: A 10 x 10 space will be provided. Vendors are responsible for providing their own tents, tables, chairs, displays or any other equipment needed.

Electricity: is available for a \$25.00 fee. Only 120V/15 amp electrical service will be provided.

Set Up Times: Friday, May 12th anytime after 1 p.m.

Show Times: - Saturday, 11:00 a.m. to 10:00 p.m.

Location: Prescott Valley Entertainment District—3001 N. Main Street—Prescott Valley, AZ 86314

Fee Payable by Cash, Check or Credit Card

Credit Card Type: Visa, MasterCard, Discover, American Express (Circle One)

Name on Card _____

Credit Card # _____ Exp. Date _____ CVC # _____

Billing Address _____ City _____ State _____ Zip _____

of Booth Requested _____ **Amount Enclosed:** _____

Agreement: I have read and agree to the specified terms and conditions for participating in PV Days. I understand there are NO REFUNDS or rain checks owing to inclement weather, or other natural causes or disturbances. I understand that I store my products at the vending site at my own risk. I hereby release and forever discharge PV Chamber from all liability claims and responsibility for personal injury, damage to artworks, equipment and material as a result of my participation in PV Days, but not limited to loss suffered before, during and after the PV Days event. By signing this form I agree to abide by all rules set forth herein. I agree that pictures or supporting materials submitted with this application are a current and true representation of my products and PV Days reserves the right to advise me of any product that does not meet the standards set by PV Chamber and I agree to immediately remove said product upon request by Prescott Valley Chamber. I give permission to Prescott Valley Chamber to use photographs submitted for advertising and marketing purposes for the event. I agree to abide by all eligibility requirements and terms and conditions. Prescott Valley Chamber reserves the right to refuse applications that do not meet event criteria.

Signature _____ Date _____

Please remit to:
 Prescott Valley Chamber
 7120 Pav Way Ste. 102
 Prescott Valley, AZ 86314
 Contact:
 Bill Grose
 928-772-8857
 Email: bill@pvchamber.org
 Fax 928-772-4267



FEES

Annual Town of PV Business License(Fee Not Required) # _____
Regular Special Event-\$15 per event & per location _____
Non-Profit-No Fee-need a copy of IRS 501(c)3 _____

www.pvaz.net

**APPLICATION FOR SPECIAL EVENT LICENSE
TOWN OF PRESCOTT VALLEY-TOWN CLERK
7501 EAST CIVIC CIRCLE
PRESCOTT VALLEY AZ 86314
928.759.3135 FAX 928.759.5536 clerk@pvaz.net**

STAFF ONLY

NAME OF EVENT Prescott Valley Days 2017

PHYSICAL LOCATION OF EVENT 3001 N Main St

DATE(S) OF EVENT May 11-14, 2017

BUSINESS/VENDOR NAME _____

CONTACT PERSON First & Last name _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (____) _____ EMAIL _____

ARIZONA TPT SALES TAX _____ **# REQUIRED IF SELLING PRODUCTS at Event**

DESCRIPTION OF BUSINESS _____ NON-PROFIT YES _____ NO _____

USE OF TENT – NO Permit for Pop-Up YES _____ NO _____

NOTIFY FIRE DEPT 928.759.9933 YES _____ NO _____

NOTIFY BUILDING DEPT 928.759.3050 YES _____ NO _____

FOOD VENDOR - Food Handlers Permit YES _____ NO _____

YAVAPAI COUNTY HEALTH 928.771.3122

TOWN PROPERTY & FACILITIES RENTAL

PARKS & RECREATION 928.759.3090 YES _____ NO X

CERTIFICATE OF INSURANCE (FOR PARKS) YES n/a

\$1,000,000 Liability with Endorsement

CARNIVAL OR CIRCUS

CERTIFICATE OF INSURANCE (FOR CARNIVAL/CIRCUS) YES n/a

\$1,000,000 Liability with Endorsement

LIQUOR PERMIT NEED 30 DAY ADVANCE NOTICE LIQUOR PERMITS ONLY(below this line)

REQUEST LETTER TO MAYOR/COUNCIL YES n/a

Explaining all details of event

CERTIFICATE OF INSURANCE (FOR LIQUOR) YES n/a

\$1,000,000 Liability with Endorsement

SECURITY- One security guard per 50 people YES n/a

EXISTING LIQUOR LICENSE/Extension of Premises YES n/a NO n/a

APPLICANT SIGNATURE _____ **DATE** _____

cc: Police Dept; Zoning/Code Enforcement; Management Services; Parks & Recreation; CYFD