

**2024 Ventura County Fair
 "Midway Magic" Independent Midway Application
 July 31, 2024 through August 11, 2024**

Midway Food Application

This application does not guarantee space, and must be filled out completely before any consideration for space can be given.

CURRENT PICTURES OF ALL EQUIPMENT LISTED BELOW MUST ACCOMPANY APPLICATION

APPLICATION MUST BE EMAILED NO LATER THAN APRIL 15, 2024 TO:

CARNIVAL@VENTURACOUNTYFAIR.ORG

ALL EMAILS WILL BE ACKNOWLEDGED WITHIN THREE BUSINESS DAYS

Please type or print in ink only.

BUSINESS NAME: _____ OWNER/CONTACT: _____

ADDRESS: _____ TELEPHONE: _____

CITY: _____ STATE: _____ ZIP: _____ CELL PHONE #: _____

E-MAIL ADDRESS: _____

PERSON IN CHARGE OF OPERATION: _____

Proposed Food Menu Items and Sales Prices:

ITEM:	PRICE:	ITEM:	PRICE:
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Proposed Drink Menu Items, Sizes, and Sales Prices:

ITEM:	PRICE:	ITEM:	PRICE:
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

IF A CONTRACT IS ISSUED, IT WILL BE ON THE BASIS OF THIS MENU ONLY. PLEASE USE AN ADDITIONAL SHEET IF NECESSARY. PLEASE ATTACH PICTURES DESCRIBING YOUR PRODUCTS AND A PHOTOGRAPH OF YOUR UNIT. APPLICATIONS CANNOT BE PROCESSED WITHOUT THIS INFORMATION. CASH REGISTERS ARE REQUIRED FOR EACH OPERATING WINDOW OF UNIT IN ACCORDANCE WITH DISTRICT RULES AND REGULATIONS.

OFFICE USE ONLY				
LOCATION	SIZE	RENT	PERCENT	CONTRACT #
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

INSURANCE REQUIREMENTS

Provided by own carrier* WFA Master List* To be purchased through the fair

*Name of insured must match business name on first page of this form

Note: Businesses with employees must also provide an acceptable certificate of workers' compensation insurance

UTILITY REQUIREMENTS

Voltage _____ Phase _____ Amps _____

DIMENSIONS

Total size of stand including hitch, awnings and counters: _____
length / width

Total size of stand only: _____
length / width

Please describe unit and hitch location when facing stand:

<input type="checkbox"/> Front serve	<input type="checkbox"/> Side serve	<input type="checkbox"/> Removable hitch
Hitch location <input type="checkbox"/> front	Hitch location <input type="checkbox"/> left side	
<input type="checkbox"/> back	<input type="checkbox"/> right side	

Total amount of space desired for operation: _____

PLEASE LIST ALL PERSONS WITH FINANCIAL INTEREST IN BUSINESS AND/OR EQUIPMENT LISTED:

BUSINESS REFERENCES

NAME	ADDRESS	CITY	STATE	ZIP	PHONE
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NAME	ADDRESS	CITY	STATE	ZIP	PHONE
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<u>PREVIOUS FAIRS PLAYED</u>	<u>LOCATION</u>	<u>YEAR(S)</u>
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1. _____
2. _____
3. _____

I understand that this is only an application for space, and not a contract. I understand that any misrepresentation of ownership or equipment condition (in photos or in application) may be grounds for revocation of a contract, if offered. I acknowledge that pre-inspection may be required of any and all equipment listed on this application prior to contract consideration.

Signature of Owner

Date

Please submit questions via email only to: Carnival@VenturaCountyFair.org