



**MARKEL / USEF YOUNG AND DEVELOPING HORSE CHAMPIONSHIP  
AND THE  
U.S. DRESSAGE FESTIVAL OF CHAMPIONS  
AUGUST 21-26, 2018**

**VENDOR APPLICATION**

**Business**

**Name:** \_\_\_\_\_

**Owner/Representative:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Nature of Business / Product Description:** \_\_\_\_\_

Space Size	Fee	Package Includes			Space Size	Space Cost	Subtotal
10 x 10	\$550	Tent w/curtains & electric					
15 x15	\$750	Tent w/curtains & electric					
20 X20	\$CFP	Tent w/curtains & electric					
Trailer	\$800	Trailer w/ electric- what AMP age is need?					
						Subtotal	
						Extra Fees	
Extra Fees	\$15.00	Table & 2 folding chairs				Total	
	\$	Tent flooring					

Accepted forms of payment: American Express, Discover, Master Card, Visa, and Check  
If paying with a credit card a 3% service charge will be added.

Card Number \_\_\_\_\_ Exp. \_\_\_\_\_ SS code \_\_\_\_\_

Card Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Certificate of Insurance:** All vendors will be required to have a certificate of insurance (Acord Form #25-S) showing that coverage is in effect from set up to take down. Failure to comply with the insurance requirements will render null and void any contractual formed by this application.

**Illinois sales tax:** All vendors are responsible to contact the state revenue department regarding collection of sale tax. A copy of the permit/certificate must accompany this vendor application.

**Important – Read and Sign:** I hereby apply for the vendor space and services at the Lamplight Equestrian Center. Your 50% deposit must accompany both signed application forms.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Both pages of the vendor application, rules, regulations, and polices must be signed, initialed and returned together with the deposit.**

**2018 Vendor Rules, Regulations, and Polices**

Please read and initial each article.

\_\_\_\_\_ **Payments:** a 50% deposit is required with application, and the final payment will be processed on day of set up.

\_\_\_\_\_ **Space assignments:** will be made for applications received and approved on a "space available" basis, length of stay and size of space requested.

\_\_\_\_\_ **Initial setup:** Each vendor is responsible for scheduling arrival with the vender department. Weekly set-up will be from 9am to 5pm prior to show start. **No** vendor set-up during the Horse Show. If you are assigned a space facing a horse only lane, you must have your vehicle or cart cleared from the lane 30 minutes before the show starts.

\*\*\*\*\* **All horses have the right of way** \*\*\*\*\*

\_\_\_\_\_ **Early arrivals:** early arrivals will be charged accordingly.

\_\_\_\_\_ **Signage:** vendor signs must not block horse or pedestrian paths. No pole banners or flags that move/wave on booths facing the horse only paths.

\_\_\_\_\_ **Parking:** vendors and their representatives must use the upper or lower guest parking lots. No parking behind show office and or farm house.

\_\_\_\_\_ **Security:** to safeguard vendor's property either during the show or after show hours is the vendor's responsibility. All property left in the booth during the show or after the show will be left at the vendor's risk.

\_\_\_\_\_ **Shipping and Receiving:** under no circumstances will Lamplight Equestrian Center be responsible for packages or merchandise ship to prior to the vendors set up date. Contact by email or phone if you have any questions.

\_\_\_\_\_ **Certificate of Insurance:** All vendors will be required to have a certificate of insurance (Acord Form #25) showing General Liability Insurance policy (\$1,000,000) naming Lamplight Equestrian Center as additional parties, effective from set up to break down.

\_\_\_\_\_ **Tents:** Additional pop-up tents must be approved by the Vendor Dept. & may be billed as additional square footage.

\_\_\_\_\_ **Cancelation and Refunds:** Must be done by email 5 days prior to your scheduled arrival date, for a deposit refund.

I have read the Term and Conditions of this Vendor application and BY SIGNING BELOW, I AGREE to be bound by all Terms and Conditions of this Vendor application, and further agree to indemnify and hold harmless, Lamplight Equestrian Center and its affiliates, its officers, employees, and agents from all costs, liabilities, attorney's fees, judgments, and expenses incurred because of or arising out of any claim, assertion, or legal proceeding concerning my obligations under this contract and form any all claims for injury or loss suffered during or in conjunction with any of the horse show during which I will be a Vendor and for any and all claims arising out of Lamplight Equestrian Center management of these shows.

Company Name (print) \_\_\_\_\_

Signature of Owner/Representative \_\_\_\_\_ Date: \_\_\_\_\_

Please print name: \_\_\_\_\_

