



## 23rd ANNUAL AUTUMN LIGHTS FESTIVAL

### Civic / Non-Profit Organization Contract

Thank you for choosing to exhibit as a Community Civic/Not-for-Profit organization at the West Milford Autumn Lights Festival.

The Autumn Lights Festival works to ensure that there is a diverse range of vendors, civics and food at the festival. We cannot however, guarantee that any one or all of the products from your offering will be unique to the festival. The street festival spans over a quarter mile necessitating the duplication of some offerings to serve over 20,000 people.

Civic/501(3)c Non-Profit (*we only accept 501(c)3 not for profit companies for reduced fee*)  
Vendor registration dates:

**April 15, 2017 thru May 31, 2017** – Vendors who participated in the 2016 Autumn Lights Festival will have first right of refusal over the spot they had the previous year.

**June 1, 2017 thru August 31, 2017** – Open registration. Spaces not requested by returning vendors **WILL BE** opened on a first come first served basis to new vendors. No exceptions.

In order to streamline your registration process, please use the checklist below. Each of the required items is listed to ensure all necessary information has been submitted with your contract. If all of the necessary information is not received with your registration contract, your paperwork will be returned to you and your registration is not complete.

**Please return ALL of the following original documents with your registration contract:**

- COMPLETED 2017 GENERAL RELEASE
- COMPLETE HOLD HARMLESS AGREEMENT
- COPY OF 501(C) 3 Form (MUST be provided with your contract or you will be required to complete a vendor contract)**
- \$25.00 CHECK MADE PAYABLE TO : TOWNSHIP OF WEST MILFORD**

If you are unable to provide the 501(c) 3 form you will need to complete the vendor registration form and pay the required fee for your spot at the festival. Additional spaces are available in 10' increments (i.e. 2 spaces x \$25 = \$50 fee)

If you have any questions, please e-mail us at [info@autumnlightsfestival.com](mailto:info@autumnlightsfestival.com).

Thank you for your cooperation and we look forward to having you as one of our vendors!



Conf# \_\_\_\_\_

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## Civic / Non-Profit Organization Contract

In cooperation with the Township of West Milford  
 Autumn Lights Committee  
 1614-0 Union Valley Road, PMB 108, West Milford, NJ 07480  
 E-mail: [info@autumnlightsfestival.com](mailto:info@autumnlightsfestival.com)  
 Website: [www.autumnlightsfestival.com](http://www.autumnlightsfestival.com)

Received: _____
Check #: _____
Amount: _____
Space: _____
Space location: _____

**EVENT:** A Celebration of West Milford! The 23rd Annual Autumn Lights Festival is capitalizing on its success and growth. The Festival will feature local vendors & craftsmen, 4H Exhibits, dance demonstrations, food vendors, live local bands and many local business displays and so much more. . .

**DATE:** Saturday, October 14<sup>th</sup>, 2017 10am - 5pm (Set-up begins at 7:00am)  
*(Heavy rain date: Sunday, October 15<sup>th</sup>, 2017)*

**PLACE:** Union Valley Road *(Intersection of Marshall Hill Road to Bearfort Shopping Plaza)* West Milford NJ 07480

**COST:** 10' X 10' space, \$25 per space  
*(MUST PROVIDE 501(C) 3 FORM TO QUALIFY for Civic/Non-Profit status)*

**Mail contract & payment to:**

West Milford Autumn Lights Festival Committee  
 1614-0 Union Valley Road, PMB 108  
 West Milford, New Jersey 07480

*Name of Organization					
*Contact person					
Street Address					
City		State		Zip	
*Telephone		*Cell			
*Website					
*E-mail <i>(Required)</i>					
Description of event participation*					
Providing own tent	<input type="checkbox"/> Yes <input type="checkbox"/> No	**Will provide own power (generator)	<input type="checkbox"/> Yes <input type="checkbox"/> No		

\* Must be completed.

\*\* Contact West Milford Fire Department at (973) 728-2840 to obtain the necessary guidelines and applications



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- **CIVIC / ORGANIZATION MUST BE NON-PROFIT AND PROVIDE 501 (C) 3 FORM TO QUALIFY FOR AS A CIVIC / NON-PROFIT**
- Each space is 10' X 10".
- There are no guaranteed locations and the ALF Committee reserves the right to limit or exclude duplicate groups and offerings.
- Tables, Chairs, \*\*Electric and Water is NOT provided (\*\*generators are permitted with proper WM Fire Marshall approval).
- We are not responsible for lost, stolen or damaged items.
- No alcoholic beverages, fireworks, pornographic/sexual material or offensive subject matter, etc. allowed. The festival is a family friendly event (ALF Committee reserves the right to refuse participation).
- For home baked goods or food items (subject to approval) **you are responsible for acquiring all necessary permits/licenses from the Township of West Milford.** These permits must be applied for well in advance of the event. Contact the West Milford Board of Health Department at (973) 728-2720 and the West Milford Fire Department at (973) 728-2840 to obtain the necessary guidelines and applications. **YOU ARE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS!**
- Hold Harmless Agreement & Requirements are to be submitted with all contracts. You will not be allowed to participate without the signed agreements on file. Animal rescue organizations are required to submit a certificate of insurance if pets are present at the festival.
- There is very limited space for this location therefore the ALF Committee reserves the right to limit or refuse duplicate civic groups (Space assignment will be on first come first serve basis for duplicate associations).
- Limit 2 cars per vendor space are permitted to park in the vendor parking areas.

### 2017 CIVIC ORGANIZATION GENERAL RELEASE

(Civic/Organization Name) \_\_\_\_\_ has agreed to occupy exhibitor space as part of the 23rd Annual Autumn Lights Festival (and has provided the necessary 501 (c) 3 status paperwork) for which \$25 payment is required and in consideration thereof agrees to indemnify and hold harmless the Township of West Milford, its employees, and all participating committees and volunteers from any and all damages, claims, liabilities or judgments arising from the undersigned's activities engaged in during the dates above including but not limited to the reimbursement of any and all costs of litigation, including reasonable attorney's fees incurred in defense of an action against the Township of West Milford. My signature verifies that I have read and am in agreement with the rules and regulations set forth in this contract.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**DEADLINE: ALL ORIGINAL REGISTRATION FORMS MUST BE MAILED AND RECEIVED NO LATER THAN AUGUST 31<sup>st</sup>, 2017.**



# 23rd ANNUAL AUTUMN LIGHTS FESTIVAL

## Civic / Non-Profit Organization Contract

### Hold Harmless Agreement & Insurance Requirements For use of Township of West Milford Property or facilities

For and in consideration of the use/rent of Union Valley Road Street Fair,  
(name of facility)  
West Milford, NJ 07480.

On the following dates: Saturday, October 14<sup>th</sup>, 2017, (rain date October 15<sup>th</sup>, 2107) for the purpose of: the 23rd Annual West Milford Autumn Lights Festival, **the undersigned agrees to Indemnify and hold harmless the Township of West Milford its officials, agents, and employees and/or volunteer workers** from any and all injuries, damages, liability, claims, costs and attorney's fees arising out of the use of said premises or property referenced including any losses or damages arising from the acts or omissions of any family member, agent, vendor, guest, participant, visitor, employee, servant or other person attending or working the event herein referred to.

This Agreement shall remain in full force and effect for any continued, additional or postponed date(s) for event indicated.

The Township of West Milford reserves the right to cancel or interrupt the event if the representations set forth herein and on application, or guidelines for use of said property are not adhered too or if the Township determines that a situation that might lead to personal injury, property damage or violation of law exists.

Type of Organization (check one):

- Individual  LLC  Partnership  Non-Profit  Corporation  Public Entity

\_\_\_\_\_  
Name of Individual or Organization

\_\_\_\_\_  
Position (\_\_\_\_\_) Telephone #

\_\_\_\_\_  
Address (not PO Box)

X \_\_\_\_\_  
Authorized Signature Date

\_\_\_\_\_  
Print Name