

2025 Dia de los Muertos Salsa Competition Application



Thank you for your interest in our Dia de Los Muertos event at Strathearn Park!

To become a part of this event please complete all the information on the following pages and return it for processing. This is a great opportunity to promote your business!

Please complete and return both pages of application with your payment. Incomplete applications will not be accepted.

Contact Information

HOST: Simi Valley Historical Society **ADDRESS:** 137 Strathearn Place

VENDOR CHAIR: Jeannie Liss PHONE: 805-526-6453

EMAIL: Jeannie@rsrpd.us WEB: www.simihistory.com

Salsa Applicant Requirements

- Submit application prior to September 12th. <u>Incomplete applications will not be accepted</u>.
- Submit proof of insurance, adding the Historical Society on as additional insured.
- Comply with all Ventura County Health and Safety standards.
- Submit a copy of your current Mobile Food Facility (MFF) or complete a Temporary Food Facility (TFF) application
 - VCEH Application: https://rmadocs.venturacounty.gov/environmental-health/programs/consumer-food-protection/forms/environmental-health-temporary-food-facility-type-1-operator-application.pdf (the completed TFF application must and attach it to their application.
- All Salsa competition applicants are asked to provide salsa tasting samples, chip samples, and the container to serve the sample.
- Make payment to Simi Valley Historical Society (\$50 per booth)
- There will be limited electrical available, and no water hookups. Applicant booth must be self-contained.
- Acceptance of Salsa competition applications will be contingent upon receipt of a valid Ventura County
 approved MFF or by attaching a completed VC Health TFF application, a copy of your Certificate of Insurance, listing Simi Valley Historical Society as an "additional insured" endorsement.

ORGANIZATION / BUSINESS INFORMATION

* ORGANIZATION NAME:	
* ORGANIZATION ADDRESS:	
* PRIMARY CONTACT:	* DAY PHONE:
* CELL:	* EMAIL ADDRESS:
* SALSA CATEGORY(S):	

All completed applications must be received no later than: Friday, September 12th



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Please complete and return full application (3 pgs.) with your payment.

Incomplete applications will not be accepted.

* ORGANIZATION NAME:
(Please initial each line)
Entry fee is \$50 per applicant for a 10 X 10 booth space
——— MFF's will be fully self-contained and be an approved Ventura County vendor.
TFF's will be responsible for providing their own Tent / EZ Up, table(s), chairs.
Please make checks payable to "Simi Valley Historical Society"
Tents/EZ Ups may NOT be staked into the ground. Sandbags highly suggested.
Your space must be left clean, in the same condition it was provided.
Vendor setup starts at 8:00 am. Participants agree to be set up and ready no later than 10:30 AM
Vendor vehicles must be off the property no later than 10:00 am, unless vehicle is part of booth Vendor teardown starts at 5 pm. Participants may NOT pack up prior to the end of the event
PLEASE MARK APPROPRIATE BOXES
MOBILE FOOD FACILITIES—(MFF) I am a VC Health MFF vendor \$50.00 fee Name:
License Plate #: Last Inspection Date MM-DD-YY:
Operator Name: Telephone #:
OR
TEMPORARY FOOD FACILITY- (TFF) I am a VC Health TFF vendor \$50.00 fee TFF application is attached I will bring a 3-compartment sink I need to use the facility 3-compartment sink I will bring Salsa only
OF SPACES: DO YOU NEED ELECTRICITY? YES NO TOTAL FEE: EST. SETUP TIME NEEDED:
SEND APPLICATION & CHECK TO: P.O. Box 940461, Simi Valley CA 93094-0461 All completed applications must be received no later than: Friday, September 12th



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<u>Please complete and return complete application (3 pages)</u> with your payment. Incomplete applications will not be accepted.

HOLD HARMLESS AGREEMENT

AGREEMENT, WAIVER, AND RELEASE

AGREEMENT, WAIVER, AND RELEASE I have carefully read the description of activities for which I/we are registering, and in consideration for being permitted by the Simi Valley Historical Society, herein "SVHS" and Rancho Simi Recreation and Park District, herein "The District" to participate. I fully understand that my participation in the above-referenced activity exposes me to the risk of personal injury, death, communicable diseases, illness, viruses, and/or property damage. acknowledge that I am voluntarily participating in this activity and agree to assume any such risks and I waive, release and discharge any and all claims for damages, personal injury, communicable diseases, illnesses, viruses, death, and/or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the District/SHVH/Strathearn Historical Park and Museum, its officers, employees, and agents from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the District/SVHS/Strathearn Historical Park and Museum, its officers, employees and agents. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the District/SVHS/Strathearn Historical Park and Museum, its officers, employees, and agents free and harmless from any loss, liability, damage, cost, or expense that they may incur as the result of personal injury, death, communicable diseases, illness, viruses, or property damage that said participant may sustain while participating in said activity. PHOTOGRAPHIC RELEASE: I understand that photographs may be taken during this activity and hereby grant the District/Simi Valley Historical Society/Strathearn Historical Park and Museum, permission to use any such photo(s) for advertising or in promotional materials, and I will not receive payment of any kind. I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RE-LEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT/SVHS/STRATHEARN HISTORICAL PARK AND MUSEUM, ITS OFFICERS, EMPLOYEES, AND AGENTS, AND I AGREE TO IT OF MY FREE WILL.

By my signature below I agree to the "Hold Harmless" agreement a that I am authorized to sign this agreement.	above. I also acknowledge
Signature:	Date:
Name (please print):	_
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