

The 12th Annual Italian American Heritage Festival
Sunday, June 5 (Rain Date Sunday, June 12), 2022
11:00 a.m. to 5:00 p.m. at the Historic Rose Tree Park

Our 2022 Celebration
Food for Thought, Mangia!!

VENDOR REGISTRATION FORM:
Food; Sweet; Business; Novelty Craft; Novelty Special (Children/Other); Non-Profit

Business Name/Contact Name

Phone

Business Address

Email Address

How many tables (\$10 each) _____ and chairs (\$2 each) _____ will you need?
Bring your own canopy or for \$85 _____ Rent 1 canopy (10x10)

**All participating businesses will be listed in the 2022 DelCoNewsNetwork, including the Delaware County Daily Times, Festival guide; in all promotional materials to the community; and on the CIAO Delco website www.ciaodelco.org*

❖ **FOOD** 10x10 \$450 (\$400 if paid by 5/1/22) 20x10 \$650 (\$600 if paid by 5/1/22)

***List your Food Offering ... or, attach your proposed menu for the event.**

❖ **SWEET** 10x10 \$225 (\$200 if paid by 5/1/22)

***Briefly describe your Sweet:**

❖ **BUSINESS** 10x10 \$225 (\$200 if paid by 5/1/22)

❖ **NOVELTY/CRAFT** 10x10 \$125 (\$100 if paid by 5/1/22)

❖ **NOVELTY/SPECIAL (Children/Other)** 10x10 \$ 75 (\$50 if paid by 5/1/22)

***Briefly describe your Business; Novelty/Craft; Novelty Special (Children/Other):**

NON-PROFIT 10x10 \$0

***Briefly describe your Non-Profit:**

***Business, Novelty & Non-Profit Packages** include one 10x10 sales space at the Festival (secure racks and displays are acceptable); One listing in the vendor section of the Official Festival Guide; Sponsor recognition and participation in press releases. You must provide your own table, tablecloth (red, white, or green), canopy, and chairs, or indicate how many you wish to rent at the top of this form.

Please complete and sign/date this Vendor Registration Form and return it along with your registration fee; checks should be made payable to CIAO Delco, P.O. Box 902, Brookhaven, PA 19015, or email it to ciaodelco@gmail.com

Food & Sweet Vendors Only – Include a copy of your certificate of insurance naming The County of Delaware and CIAO Delco as additional insured.

Signature

Date