

Miami Broward ONE CARNIVAL Host Committee Inc.
18425 NW 2nd Avenue, Suite 435, Miami Gardens, Florida 33169
305-653-1877/305-653-8528 (Fax)
info@miamicarnival.org

2025 JUNIOR CARNIVAL FOOD VENDOR APPLICATION BOOTH # _____

VENUE: TBA - SATURDAY, October 4, 2025. *Please adhere to load in and load out policy.*

COMPANY/ORGANIZATION: _____

(Please Print)

Contact Person/Title: _____

Address: _____

(City)

(State)

(Zip Code)

Phone: (____) _____

Email: _____

FOOD BOOTH PRICES:

OCTOBER 1 TO DECEMBER 31, 2024 - \$700 *Early Bird* (FULL PAYMENT MUST BE MADE BY 12/31/2024

JANUARY 1 to MARCH 31, 2025 - \$800

APRIL 1 to SEPTEMBER 30, 2025 - \$950 (FULL PAYMENT MUST BE RECEIVED BY SEPTEMBER 26, 2025)

ABSOLUTELY NO SALE OF BOOTHS AFTER SEPTEMBER 26, 2025. NO SPACE IS GUARANTEED UNTIL PAYMENT IS MADE IN FULL. BOOTH PAYMENTS ARE NON-REFUNDABLE.

An additional tent will be provided at a cost of \$ 100; advance notice is required.

Payment by Cashier's Checks or Money Orders only, payable to MBOCHCI and mailed or delivered to the above address.

Quantity of Space (size is 10' x 10') : _____ (Buses; Trailers, Trucks or Vans must secure two or more spaces).

Description of items to be sold (must be completed for processing): _____

It is understood and agreed that Vendors, their agents and/or assigns shall indemnify, hold harmless and defend Miami Broward One Carnival Host Committee Inc. (MBOCHCI), its corporate sponsors, (PLUS VENUE & ADDITIONAL ENTITIES AS REQUIRED) from all liability for loss, damage, or injury to any person or property in any manner arising out of or incident to this Vendor Agreement or the performance of its terms and provisions. Vendor shall be solely responsible for securing, at his sole cost, workers' compensation insurance, disability insurance, liability insurance and any other insurance as may be required by law. MBOCHCI reserves the right to change the Carnival Venue, if necessary. This application shall not be processed without full payment for the designated space(s). It is further understood and agreed that the space(s) listed below may not be available at the time of purchase and the undersigned shall accept the space(s) designated by MBOCHCI Vending Committee. No space(s) may be subleased at any time during the event. Vendor space(s) is(are) considered non-transferrable, non-exchangeable, and non-refundable, and all sales are considered final. No space shall be confirmed until payment is made in full. Given the nature of the event, venue location and layout are subject to change. MBOCHCI shall retain the sole rights for the sale of beer, alcoholic and nonalcoholic beverages and water on any and all of our Events. Violators are subject to immediate removal by the Police, and there will be no refunds.

The undersigned has read and understood the above and has agreed to adhere to the guidelines as stipulated in the MBOCHCI -VENDOR GUIDELINES AND AGREEMENT.

(Authorized Vendor Signature)

(Date)

OFFICIAL RECEIPT - FOOD BOOTH SPACE # _____

AMOUNT RECEIVED \$ _____ PAYMENT TYPE _____ INSURANCE RECEIVED _____

MBOCHCI REPRESENTATIVE _____ Date _____