

# 28<sup>th</sup> ANNUAL RED MOUNTAIN EAGLE POW-WOW FOOD VENDOR APPLICATION

November 1 & 2, 2014

Salt River Pima-Maricopa Indian Community, Scottsdale, AZ

**VENDORS MUST PROVIDE THEIR OWN SETUP – NO BOOTHS PROVIDED – NO ELECTRICITY**

SPACE # _____
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NATIVE AMERICAN VENDORS **ONLY** ● FIRE EXTINGUISHERS REQUIRED IN BOOTHS  
**ONLY CASH, MONEY ORDER OR CASHIERS CHECK ACCEPTED** ● NO PERSONAL CHECKS ● ABSOLUTELY NO REFUNDS

### FOOD VENDOR INFORMATION

Application and payment **MUST** be received by **October 10, 2014**. First come, first serve basis. No spaces held.  
 Space is not confirmed until application and payment is received.

**Final confirmation will be made via email/phone call from Janet Johnson with confirmation number.**

SPACES ARE 15'X15'. IF YOUR SET-UP (TRAILER) IS LARGER THAN 15'X15', YOU WILL NEED TO PURCHASE TWO SPACES.

**FEE: \$350 FOR 2 DAYS**

*RMEPC is not responsible for setting price of items. Selling price is at the vendor's discretion.*

ALL individuals working in food areas **MUST** possess a **FOOD HANDLERS CARD** (Random checks made by SRPMIC Sanitarians)

**\*\*\*ALL DRINK SALES RESERVED BY THE RMEP COMMITTEE\*\*\***

**The RMEP Committee is the official beverage sponsor**

Failure to Comply: 1<sup>st</sup> Offense - \$100 Fine – PAYABLE IMMEDIATELY

2<sup>nd</sup> Offense – Vendor will lose selling privileges for the remainder of the Pow-wow. NO REFUND.

**FOOD VENDORS must obtain a BUSINESS LICENSE through the SRPMIC Economic Development Office. Fee Charged.**

**Contact Juana Fulwilder at 480.362.7649/7600 or Email: [juana.fulwilder@srpmic-nsn.gov](mailto:juana.fulwilder@srpmic-nsn.gov)**

**FOOD VENDORS must obtain a FOOD PERMIT through the SRPMIC Environmental Health Program at least 7 business days prior to event. No Fee. Contact: Christopher Henke at 480.362.5706 or Email: [Christopher.henke@srpmic-nsn.gov](mailto:Christopher.henke@srpmic-nsn.gov)**

### FOOD SPACE

Type of setup, circle: Canopy Trailer Size: \_\_\_\_\_

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

DBA: \_\_\_\_\_

First Primary Phone #: \_\_\_\_\_ Cell \_\_\_\_ Work \_\_\_\_ Home \_\_\_\_

Second Primary Phone #: \_\_\_\_\_ Cell \_\_\_\_ Work \_\_\_\_ Home \_\_\_\_

Other Contact Name & #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_ Tribal ID or CDIB#: \_\_\_\_\_

Type of Product(s) to be sold: \_\_\_\_\_

### RMEP COMMITTEE USE ONLY

Date Received: \_\_\_\_\_ Rec'd Initial: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ MO \_\_\_\_ CCHK \_\_\_\_ Cash \_\_\_\_

Pre-Registration: Yes \_\_ No \_\_ On-Site Registration: \_\_ MO/CCHK#: \_\_\_\_\_

Food Confirmed Notification Date: \_\_\_\_\_ Notification Method: Email / Phone / Mail / In-Person

Send application and payment to JANET JOHNSON, 10320 E. Jackrabbit, Scottsdale, AZ 85256

**MAKE MONEY ORDER or CASHIERS CHECK PAYABLE TO: Janet Johnson**

Food Vendor Application Deadline: October 10, 2014

Questions regarding application, email: [redmountainpowwow@gmail.com](mailto:redmountainpowwow@gmail.com)