



LaSalle County Historical Society

101 E. Canal Street P. O. Box 278
Utica, Illinois 61373

815-667-4861

Dear Prospective Food Vendor,

It is our pleasure to invite you to participate in our **49nd Annual Burgoo Festival** to be held on **Sunday, October 7, 2018**. As you know, you will benefit from the intense and widespread advertising that we do with local, metropolitan Chicago, statewide and national media. The attendance is well into the thousands and growing. Due to the costs of maintaining this event, the Burgoo Committee has set the fee for those vendors with food stands at \$275.00 each.

We do not allow the sale of food items that will compete with Burgoo Meals, featuring Burgoo stew, barbecued pork chops, pork burgers and brat sandwiches which the Historical Society sells; or the meals served by restaurants or taverns in Utica, our host community, on Burgoo day. We also cannot allow a food vendor to undercut the prices the museum charges for soda, etc. This is, first and foremost, a fundraiser for the LaSalle County Historical Society.

Please complete the enclosed application form and return it with the vendor fee and signed liability disclaimer as soon as possible to secure your space. **All applications must be returned to the museum by August 1, 2018.** Applications received after August 1 will be processed or denied pending space available.

We are now accepting credit cards. Please use the form on the back of the application if you wish to pay by credit card.

The hours to display your wares on Sunday, October 7, will be approximately 9:00 a.m. to 5:00 p.m. (The streets have to be cleared and opened to traffic by 6:00 p.m.). These hours promise to be some of your most productive of the year. You will be contributing to the local heritage and pride in the creativity and productivity of the past and present, while increasing your own profits significantly.

Please feel free to call or write if you have any questions. You may also email us at events.lchs@gmail.com. We are looking forward to hearing from you, and seeing you on **Burgoo Day**.

Sincerely,

Burgoo Festival Committee

For Office
Use Only
Date Rcvd. _____ Vendor # _____ Amount Pd. _____ Check # _____ 2017 _____ 2018 _____

BURGOO STREET VENDOR APPLICATION FOR OCTOBER 7, 2018 PERMIT

(Please Print)

NAME _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NO. (____) _____

E-Mail _____

ITEMS TO BE SOLD (Please Specify)

Please Specify One or Two Day

____ **Sunday Only Food Vendor --\$275**

____ **Saturday and Sunday Food Vendor \$550**

TWO DAY FOOD VENDORS WILL NEED TO CONTACT LASALLE COUNTY HEALTH DEPARTMENT AT 815-433-3366 FOR ADDITIONAL PERMITTING

I have thoroughly read the letter and guide lines for Burgoo Vendors and agree to comply with all the terms, and to sign and abide by the liability disclaimer attached. I further understand that that I may not sub-lease, sell or give away this space without written permission from the Festival Committee. I will maintain a neat and attractive booth within the designated area, and will prominently display the Burgoo Vendor Permit at all times. I will be responsible for cleaning my area thoroughly after I close. I will try to carry out the heritage theme of the Burgoo being presented by the LaSalle County Historical Society.

Date _____ Signed _____
Signature Required.

I accept and assume full liability for any injury or loss to me, my property, agents or employees at any time and from any cause on the premises of the show. I expressly release the LaSalle County Historical Society, its employees, board, and volunteers, and the Village of North Utica, from any liability for such loss, injury or accident, and agree to provide and pay for my own insurance.

Date _____ Signed _____
Signature Required.

MAIL COMPLETED FORM AND CHECK OR MONEY ORDER TO: LaSalle County Historical Society, P.O. Box 278, Utica, IL 61373: Burgoo. (If you have any questions call: 815-667-4861)

To pay for your space by credit card please fill out the following. All information is required.

Name on Card _____

Address _____

City _____ State _____ Zip _____

Card Number _____

Expiration Date mm / yy _____

Visa _____ MasterCard _____ Security Code _____

Amount of Purchase: _____

I agree that this is a valid charge for the rental of a Burgoo Vendor Space. If this charge is refused by the Card Company, after the initial authorization, for any reason, I agree to pay LaSalle County Historical Society (by cash, cashier's check or money order) the full amount within 10 days of notification.

Authorized Signature _____

Date _____

| For Office Use Only | | | |
|---------------------|------|----------|----------|
| Entered | Date | Initials | Accepted |
| | | | |