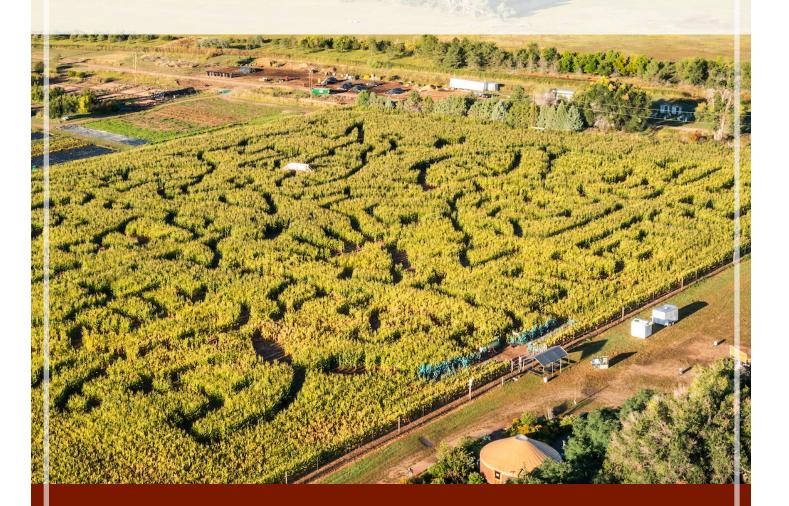
2024 CORN MAZE

SERVICE AGREEMENT & VENDOR APPLICATION



GARBENS

Chatfield Farms



This application does not automatically guarantee participation in the 2024 Corn Maze.

Event Dates & Hours

Corn Maze opens Friday, September 20 and runs weekends through Sunday, October 27. The maze is open from 9 a.m. – 6 p.m. (last entry at 5 p.m.) on Fridays, Saturdays, and Sundays. Additional weekday opportunities will be announced as scheduled. The expected Corn Maze attendance throughout September and October is over 35,000 with the potential of an additional 30,000 for the three-day Pumpkin Festival October 11-13, 9 a.m. – 5 p.m.

Rules & Regulations

Listed below are the rules and regulations that you agree to accept by signing the application.

Vendors are required to comply with all state and local mandates regarding Covid-19. All applications due by August 5 for consideration to participate. You will be notified after that date if you are accepted.

Indemnification

Vendor shall protect, defend, and save the Denver Botanic Gardens, its officers, agents, employees and volunteers, while acting within the scope of their duties as such, harmless from and against all claims, liabilities, demands, causes of action, and judgments (including the cost of defense and reasonable attorney fees) arising in favor of or asserted by third parties on account of damage to property, personal injury, or death which injury, death, or damage, arises out of services performed or omissions of services or in any way results from the negligent acts or omissions of the contractor, its agents, or subcontractors, except the sole negligence of the Denver Botanic Gardens. Furthermore, I understand that I store my product at my own risk.

By signing this form I acknowledge that I have read, understand and will abide by the policies outlined in the application and vendor letter. I understand that failure to follow these regulations could result in additional fines and expulsion from Corn Maze and/or future events.

Booth Space

You are renting the space size as listed on your application. Each vendor space will be marked and placed side-by-side with little to no room in between vendors. Vendor spaces cannot be switched or moved upon arrival for set-up.

The agreement is for the space only. You are responsible for supplying your own covering, tables, chairs, generator for electrical needs and other equipment or signage you may need. All activities related to your booth must remain within your rented space. Vendor is responsible for maintaining a safe and clean booth space. All tenting must be secured and able to handle inclement weather including wind, rain and snow. No less than 50 pounds per corner on tents. WiFi is not included in the rental of the space and coverage is not guaranteed.

Booth Fees

Payment may be made by check or credit card payable to Denver Botanic Gardens. All applications must be accompanied by at least a 50% payment in order to be processed. The balance is due September 1. Booth fees are non-refundable once paid. Event is rain or shine; no refunds for inclement weather or acts of god.

Vendor Hours

Vendors are required to be present for the hours as listed above unless prior written approval is given from the Chatfield Farms events staff. Vendors may drive vehicle to booth space for drop off but are required to have vehicle in vendor parking at least 30 minutes prior to opening. Vehicles are not permitted to drive to booth space during corn maze operation. Vendors not complying with operational times and rules will be expelled from Corn Maze and/or future events. At times due to weather, adjustments may be made to the operational hours. These will be communicated by the Chatfield Farms events team via text as listed on the application.

Move-In/Breakdown

Move-in will be September 16-19 between 9 a.m. – 3 p.m., exact time needs to be scheduled with Chatfield Farms events staff after event confirmation is sent in early September. Breakdown may begin at 6 p.m. on Sunday, October 27. Clean-up may also be done from 9 a.m. – 3 p.m. on October 28 – November 1. Clean-up must be concluded by 4 p.m. on November 1.



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Permits & Inspection

Vendor is responsible for applying and paying for required permits, including but not limited to sales tax and food vendor, from the county and state. Fire marshal may inspect all vendor booths.

Parkina

Vendors will receive two parking passes for vendor parking. Parking location will be detailed in the confirmation letter to be sent in early September. If additional spots are needed vendors may park in general Corn Maze attendee lot. Parking location may change for Pumpkin Festival, weather accommodations, construction updates, or other needs as deemed by staff. The primary contact on the application is responsible for notifying staff of parking changes.

Products/Menu/Services

Each vendor is permitted to sell only the items approved by Chatfield Farms events team. To ensure success of Corn Maze vendors, Chatfield Farms may limit the number of vendors offering the same or similar products. During Pumpkin Festival additional vendors will be added offering similar or the same product. Your list will be approved at acceptance and any items not permissible will be communicated prior to acceptance. Food vendors are permitted to sell any bottled drinks, excluding alcohol, without prior approval. Vendors are NOT permitted to sell alcohol at any time. Doing so will results in vendor being asked to leave immediately without refund. Vendors selling items that have not been approved by Chatfield Farms events team will be given a warning. If this continues, vendor will be asked to leave the event and no booth fee will be refunded.

Trash

Vendors are permitted to dispose of waste in the Chatfield Farms dumpster, but are required to put all items into the dumpster and properly close the dumpster. Vendors are NOT permitted to dispose of items in the trash cans provided within the Corn Maze vendor/eating area. Vendor is required to follow guidelines on grease disposal or other hazardous waste.

Certificate of Liability Insurance (Sample Attached)

| All vendors are required to provide a copy of certificate of liabil insured. Depending on business classification, vendors may also must make that determination. | , |
|---|-------|
| Vendor Signature: | Date: |
| By typing your name on this line, it denotes an authorized signa Denver Botanic Gardens Chatfield Farms reserves the right to char | , , |
| Print Name: | |

For more information contact the Chatfield Farms Public Events Office at 720-865-4352 or chatfield-specialevents@botanicgardens.org | botanicgardens.org



This application does not automatically guarantee participation in the 2024 Corn Maze.

| Vendor Information | | | | | | | |
|---|--|-----------------------------------|-------------------------|--|--|--|--|
| | | | | | | | |
| Contact Person | | | | | | | |
| Company | | | | | | | |
| Address | | | | | | | |
| City/State/Zip | | | | | | | |
| Email | | | Cell Phone | | | | |
| Website | | | Emergency Cell | | | | |
| | | | | | | | |
| Booth Rental Informat | tion | | | | | | |
| boom kemai imormai | non | | | | | | |
| | Booth Type | е | CORN MAZE Vendor Fee | Sub-Total | | | |
| FOOD Vendor 20' wide | x 20' deep | | \$1,150 | | | | |
| FOOD Vendor 10' wide x 20' deep | | | \$900 | | | | |
| Hop Festival Only (September 21) | | | \$200 | | | | |
| | TOTAL (1/ | 2 due with application; balance d | ue September 1, 2024) | | | | |
| | | | | | | | |
| Booth Payment Inform | nation | | | | | | |
| Payment Amount | \$ | | | | | | |
| Payment Type | | | | | | | |
| *TO PAY WITH CREDIT CARD, fill out this form and note that you'd like to pay by credit card. A Chatfield Farms staff member will call you for your credit card information. | | | | | | | |
| Please do not send credit card information via email. | | | | | | | |
| | | | | | | | |
| Booth Payment Inform | nation | | | | | | |
| Type of Booth □ Food Truck □ Trailer □ Booth/Structure □ Tent | | | | | | | |
| Open Flame Cooking | | | | | | | |
| Food Truck/Trailer | Will the food truck/trailer remain on site □ Yes □ No | | | | | | |
| Pop-up Tent | Do you use a pop-up tent ☐ Yes ☐ No | | | | | | |
| | <u>,</u> | | | | | | |
| Complete application | and send with n | gyment to Denver Botanic Gard | lens Chatfield Farms | | | | |
| MAIL | Complete application and send with payment to Denver Botanic Gardens Chatfield Farms | | | | | | |
| | | PHONE 720-865-4352 | chatfield-special | chatfield-specialevents@botanicgardens.org | | | |



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Booth Products/Menu/Services

Please list all items that you will have available for sale at Corn Maze. No additional items may be sold without written approval from Denver Botanic Gardens Chatfield Farms. If needed, include an additional page with your application listing all items. For similar items with different price points you may list the item once with the price range, i.e. if you sell candles at various prices, you may list the item as candles and the price as \$5-\$25.

| ITEM | PRICE | ITEM | PRICE |
|------|-------|------|-------|
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) CURRENT DATE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to

| | the terms and conditions of the policy, certificate holder in lieu of such endors | | | ndorse | ment. A stat | ement on th | is certificate does not c | onfer i | rights to the |
|------------------------|---|----------------------|---|--------------------|--|--|---|------------|---------------|
| | ODUCER | | | CONTA NAME: | СТ | | | | 70 |
| AGENT | | | PHONE | ar. a. | | FAX (A/C, No): | | | |
| | ADDRESS | | | (A/C, No E-MAIL | o, EKO: | | JAJC, NOJ. | | |
| | PHONE NUMBER | | | ADDRE | 3106 | | | | |
| | PHONE NUMBER | | | 012/02 | RA: INSUR | | RDING COVERAGE | | NAIC # |
| IMIC | URED | | | 10000000 | | EK S NAN | 112 | | |
| IIVO | | | | INSURER B: | | | | | |
| | INSURED'S NAME | | | INSURER C: | | | | | |
| | ADDRESS | | | INSURER D : | | | | | |
| | PHONE NUMBER | | | INSURER E : | | | | | |
| | | | TOTAL STREET | INSURER F: | | | | | |
| 2.7.7 | | | NUMBER: | | | | REVISION NUMBER: | | |
| C | THIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY RE CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH | QUIREMEN PERTAIN, | NT, TERM OR CONDITION THE INSURANCE AFFORD | OF AN | Y CONTRACT THE POLICIES REDUCED BY | OR OTHER I S DESCRIBEI PAID CLAIMS | DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO | CT TO | WHICH THIS |
| LTR | | INSR WVD | POLICY NUMBER | | POLICY EFF (MM/DD/YYYY) | (MM/DD/YYYY) | LIMIT | S | |
| A | GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY | | POLICY NUMBER | R | START | END | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ | |
| | CLAIMS-MADE OCCUR | 70 | | | DATE | DATE | MED EXP (Any one person) | \$ | |
| | | | | | | | PERSONAL & ADV INJURY | \$ | |
| | | 4 | | | | | GENERAL AGGREGATE | \$ | |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | MI | TELL | | PRODUCTS - COMP/OP AGG | s | |
| | POLICY PRO- LOC | | | | | | | \$ | |
| D | AUTOMOBILE LIABILITY | | | 111 / | 1 | | COMBINED SINGLE LIMIT (Ea accident) | s | |
| | ANY AUTO | | | 1 4 | | No. | BODILY INJURY (Per person) | \$ | |
| | ALL OWNED SCHEDULED | | 4 | | | | BODILY INJURY (Per accident) | s | |
| | HIRED AUTOS AUTOS NON-OWNED AUTOS | | | | | d W | PROPERTY DAMAGE | s | |
| | HIRED AUTOS AUTOS | | | | | A | (Per accident) | 5 | |
| В | UMBRELLA LIAB COCUR | | | | | | EACH OCCUPATION | s | |
| _ | - CCCOR | | | | | | EACH OCCURRENCE | 100 | |
| | CDUMS NOIDE | | | | | | AGGREGATE | \$ | |
| C WORKERS COMPENSATION | | | | - | | WC STATU- OTH- | S | | |
| • | AND EMPLOYERS' LIABILITY Y/N | | | | | | TORY LIMITS ER | | |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE N/A | | | | | | E.L. EACH ACCIDENT | | |
| | (Mandatory in NH) If yes, describe under | | | | | | E.L. DISEASE - EA EMPLOYEE | | |
| es: | DÉSCRIPTION OF OPERATIONS below | | | - | | | E.L. DISEASE - POLICY LIMIT | 17.3735.57 | |
| D | GarageKeepers Liability | | | | | | | Limit | |
| DES | SCRIPTION OF OPERATIONS / LOCATIONS / VEHICL | LES (Attach / | ACORD 101, Additional Remarks | Schedule | if more space is | required) | | | - |
| | | | | | Northead American | and more y | | | |
| | DI | ESCRIP | TION OF EVENT: DA | ATES, | TIMES, AN | ID LOCAT | ION | | |
| CE | ERTIFICATE HOLDER | | | CANO | ELLATION | | | | |
| | Denver Botanic Gardens, Inc. 909 York Street | | | THE | EXPIRATION | DATE TH | ESCRIBED POLICIES BE C EREOF, NOTICE WILL CY PROVISIONS. | | |

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Denver, CO 80206-3799

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