



# 2024 West Fargo Cruise Night Food Vendor Form

Vendor Fee: \$300 | \$100 Individual Night

Please return your completed form along with a copy of Fargo Cass Public Health food license to:  
West Fargo Events Attn: Ella Donais  
320 32nd Ave W. Suite 220 | West Fargo, ND 58078  
or email to [ella@westfargoevents.com](mailto:ella@westfargoevents.com)

Business: \_\_\_\_\_

Contact: \_\_\_\_\_

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

Website: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Please provide your complete menu:

- I understand that West Fargo Events and the City of West Fargo do not guarantee exclusivity to any vendor
- I agree to accept all liability for any damages caused by the set-up, operation or tear down of my booth, and to indemnify and hold harmless West Fargo Events and the City of West Fargo for any claim, demand or liability arising out of such operation, sales, services and to defend West Fargo Events and the City of West Fargo for any such claim, demand or liability including all attorney fees and costs incurred.
- I agree to assume full risk of any injury, property damage or loss which I may sustain as a result of my participation in any and all activities connected with or associated with my participation in an event held by West Fargo Events and the City of West Fargo. Further I understand that I should carry my own insurance and that I display and/or store my products at my own risk.
- I agree to list West Fargo Events and the City of West Fargo as additionally insured on my insurance policy, and I will submit a Certificate of Insurance no later than 30 days prior to the event. I understand that failure to submit this COI will result in exclusion from the event.
- I agree that booth placement is at the sole discretion of the event coordinator and no booth locations have been promised in advance.
- I understand that due to the nature of parking food trucks and trailers in tight spaces, that strict timelines for arrival and departure must be adhered to.
- Vehicles that are used to pull food trailers must be parked off site. If a vehicle is necessary to the operation of your booth, additional fees will apply.



# 2024 West Fargo Cruise Night Vendor Form

Vendor Fee: \$300 | \$100 Individual Night

Please return your form to:

West Fargo Events Attn: Street Fair  
320 32nd Ave W. Suite 220 | West Fargo, ND 58078  
or email to [ella@westfargoevents.com](mailto:ella@westfargoevents.com)

Business: \_\_\_\_\_

Contact: \_\_\_\_\_

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

Website: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Are your products homemade?

Yes

No

Please provide a general list of the items that you will be selling, as well as any product or brand affiliation:

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I agree to assume full risk of any injury, property damage or loss which I may sustain as a result of my participation in any and all activities connected with or associated with my participation in an event held by West Fargo Events and the City of West Fargo. Further I understand that I should carry my own insurance and that I display and/or store my products at my own risk.

I agree that all demonstrations and exhibits may be photographed or recorded for future promotional purposes.

I agree that booth placement is at the sole discretion of the event coordinator and no booth locations have been promised in advance.