



Heritage Days 2026

VENDOR APPLICATION

To apply, either return this form to
City Hall OR apply online at ivinsutah.gov
Vendor Booths open Saturday September 12th
from 9am to 3pm at Ivins City Heritage Park



Name: _____ Today's Date: _____

Company Name: _____

Address: _____

Phone Number: _____ Email Address: _____

Applications will be reviewed for approval. An application does not guarantee approval.

If your application is not approved, you'll receive a full refund.

-Describe what your booth will be selling, providing, etc. Please be complete and descriptive. Only one type of each vendor will be approved.

-Last 4 of SSN # OR STC # OR FEIN # OR ITIN # OR SSE (Sales Special Event ID) # _____

REQUIRED TO HAVE A VENDOR BOOTH. You can setup an account with the Utah State Sales Tax Commission Special Event Unit to get Sales Special Event ID. 801-297-6303 or specialevent@utah.gov.

-Will you be charging for your items or services? Y _____ N _____

-Will you be selling food? Y _____ N _____

If YES, you will have (in hand) both a Southwest Utah Public Health Permit and Food Handlers Permit?
Y _____

If you have a brick-and-mortar store within 20 miles, you can operate under your store's Southwest Utah Public Health Permit. Food Handlers Permit is still required. Homemade food must have a sign clearly indicating it is homemade.

If YES, Food Handlers Permit Number _____

-You will be able to provide your own power, if needed. Y _____

Booths will not have access to power. Food trucks will have limited access to power – contact P&R if you plan to use

-Will you be using a food truck/trailer? Y _____ N _____

If YES, what are the dimensions? What side is the service access on?

-Any additional comments (optional)

Please sign the waiver on the other side of this form.

Heritage Days Registration Indemnification/Hold Harmless/Release of Liability Agreement

I hereby give my permission for myself or my dependent (hereafter "participant") to participate in Ivins Parks & Recreation programs. In consideration of your accepting participant's entry, I hereby voluntarily and knowingly for myself, my heirs, executors and administrators waive and release, indemnify and hold harmless Ivins City, the Ivins Parks & Recreation Department, Washington County School District, and their agents and employees, or anyone acting in consort with them for all harm, accidents, personal injury or property damage suffered by participant and/or arising out of, or in any way connected with participation in the Ivins Parks & Recreation program, including all travel in connection with the program, including any caused negligence of Ivins City and/or its employees or agents.

I understand that Ivins City does not provide medical or accident insurance and that I am responsible for all medical costs if participant is injured. I hereby certify that participant is in good health and capable of participating safely in the Ivins City Program and that participant has accident and health insurance.

I acknowledge that participant is aware that this program is a hazardous activity that could lead to serious injury or death. I assume all risks associated with participation in this program, including but not limited to falls, contact with other participants, personal injury (bodily and/or emotional injury), the effects of the weather, traffic, and all other risks related in any way to this program. All such risks to participant are known and understood.

I understand that the Ivins Parks and Recreation Department may take photographs and/or videos of participants during programs and events. I grant permission for these images and/or videos to be used by the Ivins Parks and Recreation Department for marketing and promotional purposes, including but not limited to brochures, social media, websites, and other official materials. I waive any right to inspect or approve the final product and understand that no compensation will be provided for such use.

Participant agrees to abide by all rules of the program and engage only in conduct in an appropriate and sportsman like manner. If participant fails to do so, I understand that participant will be asked to leave the facility where the program is being held for the remainder of the day and possibly for the remainder of the program. If participant's behavior is of a violent nature, I understand that the Police will be called and charges, if warranted, will be filed.

SIGNATURE: _____ DATE: _____

Taxes, Permits, Certificates and any Licenses required are the responsibility of the vendor. Vendors are allowed to sell products and are responsible for all taxes associated with such sales.

Tax information will be mailed from State Tax Commission after Heritage Days. You can choose on your account to have it emailed instead, if you prefer. 801-297-6303 or specialevent@utah.gov

PERMITS MUST BE ON HAND AT EVENT

\$25.00 FEE. TURN THIS FORM IN TO COMPLETE YOUR APPLICATION.

**Find and submit applications in person at City Hall (85 N Main St Ivins, UT 84738)
or apply online at ivins.recdesk.com under PROGRAMS**

Learn more about Heritage Days at ivinsutah.gov/ivins-heritage-days-2026

If you have any questions, please call/email Parks and Recreation at 435-634-7719 or snash@ivinsutah.gov

OFFICE USE ONLY

Fee: \$25.00

Recreation – Heritage Days

GL Code: 103827.0

Date Paid: