

2024 CROSS STREET MARKET VENDOR REGISTRATION

Primary Contact _____

Business Name [if applicable] _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

Website and/or Social Media _____

Products you plan to sell at the Cross Street Market _____

CROSS STREET MARKET VENDOR GENERAL RELEASE AND INDEMNITY

For and in consideration of having this application processed and approved for other good and valuable consideration:

1. The vendor gives permission to the Cross Street Market, its members, officers, employees, agents and sponsors for the recording, photographing, reproduction and broadcasting/telecasting of any visual or aural occurrences during the events listed above or its preparation.
2. The applicant acknowledges that they have received a copy, read and agree to comply with the 2024 Cross Street Market Rules.
3. If applicant is selling consumable goods, guidelines issued by the State of Illinois and the Crawford County Health Department must be followed. Applicant is responsible for complying with all applicable laws, regulations and ordinances pertaining to their products. Permits must be visible at the Cross Street Market.
4. The applicant agrees to clean their space after the Cross Street Market.
5. Inappropriate language or conduct, including loud music and noise, toward other vendors, customers, or managers will not be tolerated and may result in suspension from the Cross Street Market.
6. The applicant assigns all rights and releases from liability the Cross Street Market, its members, its officers, employees, agents, sponsors, and assigns, and all other persons, firms or corporations liable or who might be claimed to be liable, none of whom admit any liability to the undersigned, but all expressly deny any liability, from any and all claims, demands, damages, actions, causes of actions, or suits of any kind or nature whatsoever, and particularly without limitation on account of all injuries or claims, known and unknown, both to person and property, which may result or may in the future develop from any activities taking place in connection with the activities contemplated hereby.
7. The applicant hereby indemnifies and agrees to defend and hold the Cross Street Market and its sponsors harmless from and against any claims, demands, loss, damage, or expenses resulting from the negligent acts or omissions of the Cross Street Market that may result in connection with the activities contemplated hereby or may in future develop from any such activities.

I hereby certify that the information contained in this registration form is true and correct. I have read the general release and indemnity statement and will comply with them. I understand that it is my responsibility to make sure that anyone working with me at the Cross Street Market has read and understands this agreement.

Signature _____ Date _____

For questions regarding the Cross Street Market please email robinsonchamber@hotmail.com or find us on Facebook at Cross Street Market. For more information on health and safety regulations please contact the Crawford County Health Department at 618-544-8798.

MAIL COMPLETED FORM TO ROBINSON CHAMBER OF COMMERCE, PO BOX 737, ROBINSON, IL 62454