

Event Food Vendor Agreement
Books & Breezes Kite Festival
Sunday, August 2, 2026— Tarkio Airport

This agreement is made between the Event Coordinator (“Coordinator”), representing the Atchison County Library’s “Books and Breezes” Kite Festival, and the undersigned food vendor (“Vendor”) for participation in the Books & Breezes Kite Festival.

Event Details

Sunday, August 2, 2026

Tarkio Airport, 18541 State Hwy O, Tarkio, MO 64491

Set-Up Time: To be provided closer to the event date

Event Hours: 11:00 a.m. to 4:00 p.m.

Vendor Responsibilities

The Vendor agrees to:

- Be present and fully operational for the entire duration of the event.
- Provide their own food truck, booth, or setup equipment unless otherwise agreed upon.
- Comply with all health and safety regulations required by local authorities.
- Dispose of all trash and grease responsibly and leave the vendor space clean.
- Pay the vendor **fee of \$200** in advance OR **agree to a post-event donation based on sales** (arrangement must be confirmed in writing prior to the event).
- Supply their own food, drinks, staffing, and supplies.
- Have appropriate licenses and permits for food service.

Event Coordinator Responsibilities

The Coordinator agrees to:

- Reserve a vendor space for the Vendor at the event.
- Provide access to electricity.
- Promote the Vendor’s participation on event materials when applicable.
- Share load-in, set-up, and other logistical details in advance of the event.

Terms of Agreement

This signed agreement confirms the Vendor’s commitment to participate in the event.

- Cancellation by the Vendor less than 10 days before the event may result in forfeiture of the vendor fee (if applicable).
- The Coordinator reserves the right to cancel or modify the event due to weather or other unforeseen circumstances and will notify the Vendor as early as possible.

By signing below, both parties agree to the terms of this agreement and confirm participation in the Books & Breezes Kite Festival on August 1, 2026.

Vendor Name: _____

Business Name: _____

Phone: _____

Email: _____

Vendor Signature: _____ Date: _____

Coordinator Name: Jennifer Roup

Coordinator Signature: _____ Date: _____