

# TOWN OF MIAMI LAKES



Annual

# "Paint a Picture for Mom"

*and Flower Show*



# VENDOR APPLICATION

*For more information, please contact Katya Lysak at  
(305) 698-9308 or by email at [lysakk@miamilakes-fl.gov](mailto:lysakk@miamilakes-fl.gov)*



# PAINT A PICTURE FOR MOM AND FLOWER SHOW

EVENT DATE:	Saturday, May 9, 2015
EVENT START TIME:	10:00 am
VENDOR ARRIVAL TIME:	8:30 am to 9:30 am
LOCATION:	Miami Lakes Picnic Park West 15151 NW 82nd Avenue, Miami Lakes, FL 33016
AUDIENCE:	500

This free event is hosted by the Town of Miami Lakes and its Cultural Affairs Committee. Children of all ages will have the opportunity to be creative and paint something special for their moms. Canvas, brushes and paint will be provided free of charge. In addition, there will be a display of colorful flowers and assorted plants for sale.

Vendors will be provided with one 6' rectangular table and two chairs at the event. Interested vendors must complete and provide the following to the Town of Miami Lakes in advance:

- Complete the vendor reply form and waiver (attached)
- Certificate of Liability Insurance (\$1,000,000) naming the Town of Miami Lakes (6601 Main Street, Miami Lakes, FL 33014) as the Certificate Holder and naming the Town of Miami Lakes as an additional insured.
- Applicable licenses to be able to sell items to the public
- \$50 vendor fee (by check or credit card)

For more information about becoming a vendor, please contact Katya Lysak at (305) 698-9308 or by email at [lysakk@miamilakes-fl.gov](mailto:lysakk@miamilakes-fl.gov).



# TOWN OF MIAMI LAKES

## Paint a Picture for Mom and Flower Show

### VENDOR REPLY FORM

Yes, I want to be a vendor at the Paint a Picture for Mom and Flower Show Event

Organization Name: \_\_\_\_\_

Contact Person & Title: \_\_\_\_\_

Billing Address: \_\_\_\_\_

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

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

Names of those that will be manning the vendor booth (please list all): \_\_\_\_\_

*\$50 vendor fee. Please make check payable to: Town of Miami Lakes*

Credit Card Type:  Visa  MasterCard  American Express

Credit Card Number: \_\_\_\_\_ Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For myself or individuals attending with me, as a vendor, using a facility and attending an event of the Town of Miami Lakes, I hereby waive any claim against the Town of Miami Lakes and it's agents, servants and employees hereafter arising from injuries sustained while participating in or using said facilities to myself or said individuals. I do covenant to indemnify, hold harmless and defend the said Town, its agents, servants and employees from any claim, damages on demand hereafter arising out of any injury to myself or said individuals regardless of whether such injury to said individual or to myself is caused in whole or in part by the negligence of said Town or by the negligence of the agents, servants and employees of the Town.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



- I have filled out the above information and signed the waiver
- I have attached the certificate of insurance
- I have attached proof of licenses
- I have included payment information

Thank you for your participation!

Please contact Katya Lysak, Leisure Services Manager, at (305) 698-9308 or by email at [lysakk@miamilakes-fl.gov](mailto:lysakk@miamilakes-fl.gov) with any questions. We look forward to your participation at the event.