



COLONY DAYS VENDOR APPLICATION

Atascadero Colony Days at Fall Fest

Saturday, October 17, 2026 • Downtown Atascadero



Name of Business or Organization _____ Resale # or 501c3# (501c3 #Must be included for nonprofit rate) _____

Address _____ City _____ State _____ Zip code _____

Contact Person _____ Phone _____ E-mail _____

Item to sell, distribute, or demonstrate: _____

Preferred Booth Location (Circle One): West Mall or La Plaza Add to event mailing list? Y / N

Special request? _____

Atascadero Colony Days Please circle desired booth		
CATEGORY	Early Deadline to register Aug. 31	Deadline to register Sept. 28
Artisan	\$80	\$100
Regular	\$128	\$160
Nonprofit	\$112	\$140
Political/ Corporate	\$320	\$400
Nonprofit Food	\$160	\$200

Electricity will not be provided. Please bring a quiet generator if electricity is needed.

* We encourage you to have interior lights to your tent if you plan on staying late.

Booth location is chosen by the committee, no exceptions; requests may be considered.

The Committee reserves the right to change your desired category, or deny entry into festival for any reason.

Both is 10' by 10'. Limited spaces available. For more info, contact atascaderocolonydays@gmail.com

Booth Category: _____ Number of booth spaces : _____ x \$ _____ rate = \$ _____

(Circle One) Check or Credit Card #: _____ Visa MC Amex Discover

Total: \$ _____ Exp. Date: _____ CVV/CVC: _____ Billing Zip code: _____

* I agree to the above event and charges for this event.

*In the event I need to cancel after the September 28, 2026, deadline, my vendor fee will not be refunded. If the event is canceled due to inclement weather, or any other reason, my vendor fee will be applied to the following year's Atascadero Colony's Day event on 10/16/2027.

*Signature: _____ Date: _____

* All applications need to be signed, whether paying by check or credit card. Please mail payment and application to: Colony Days, P.O. Box 1913, Atascadero, CA 93423

All food vendors are responsible for obtaining the necessary health permits. Go to SLO County Health Dept.'s at slopublichealth.org or call (805) 781-5544.

OFFICIAL USE ONLY Date received _____ Check # _____ Amount _____ Vendor ID: _____



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RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE

I, _____ fully understand that my participation in the Atascadero Colony Days (Event) exposes me to the risk of personal injury, death, or property damage. I hereby acknowledge that I am voluntarily participating in the Event and agree to assume any such risks. I hereby release, discharge and agree not to sue Atascadero Colony Days Committee, En Fuego Events, the City of Atascadero, or any other vendor for any injury, death or damage to or loss of personal property arising out of, or in connection with my participation in the event(s) from whatever cause, including the active or passive negligence of the Event(s) or any other participants in the Event(s). In consideration for being permitted to participate in the Event(s), I hereby agree, for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless the Atascadero Colony Days Committee, En Fuego Events and/or the City of Atascadero from any and all claims, demands actions or suits arising out of or in connection with my participation in the Event(s).

I HAVE CAREFULLY READ THIS RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT ON MY OWN FREE WILL. I agree to the above event and charges for this event.

Signature: _____ Date: _____

ALL VENDORS: must have a retail sales permit from the California State Board of Equalization and must handle their own sales tax collection and reporting. All vendors are required to be open for business during the hours of 10 a.m. - 3 p.m. but you are welcome to stay til 10 p.m. for Atascadero Colony Days at Fall Fest. All sales must be made from your booth. No walking around selling. All vendors must have liability insurance. If you have insurance ask your provider for a "Certificate of Insurance" naming Atascadero Colony Days Committee, En Fuego Events and the City of Atascadero as additional insured. If you do not have insurance, you MUST sign the attached Hold Harmless agreement. In addition, all food vendors are responsible for obtaining the necessary health permits. You can download a form from the SLO County Health Department Website at www.slopublichealth.org. Make sure it is the Temporary Food Facility checklist and application. The San Luis Obispo County Health Dept. phone number is (805) 781-5544. Please make a copy before you mail it in and keep a copy in your booth during the event. NO Polystyrene ("Styrofoam") food containers, Please! Atascadero is a polystyrene FREE City).

BOOTH SETUP: Colony Days setup: 8 a.m. to 9:45 p.m.

PARKING: There is no designated "vendor parking," suggested parking nearby will be provided later on an event map.

Names and ages of those working your booth:

_____	_____
_____	_____
_____	_____
_____	_____

Please consider donating a portion of your proceeds to Atascadero Colony Days.
 We are a 501(c)3 nonprofit that have run on public support since 1973.

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