



# Securian Winter Run 2019 Saint Paul Winter Carnival Race Day Vendor Booth



*All proceeds directly benefit the Saint Paul Festival & Heritage Foundation*

Vendor Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Day-of Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Website: \_\_\_\_\_

**Booth Fee:**  
\$200

Please provide a short description of proposed products in the space below. Please make note of any power/ electrical needs in this space. Due to the popularity of this event, space is limited. *If supplying product/samples for runners, please send at least 1000 units.*

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*The Saint Paul Festival and Heritage Foundation (SPFHF) reserves the right to deny entry of any organization or product. Vendor will be notified of application status acceptance or denial.*

**Location:**

The Securian Winter Run starts at the Securian headquarters: 400 Robert Street North, Saint Paul, MN 55101

**Set-up:**

Vendors may begin loading in at 6:00am on January 26, 2019. Vendors must be set up by 7:30am when Race Registration begins. Unless specified otherwise in the agreement, Vendor must provide all furniture, chairs, tents, and other equipment necessary for their booth. Neither Securian nor SPFHF accept responsibility for any lost or stolen items, or for the return of any rental equipment other than their own.

**Tear-Down:**

Vendors may begin tearing down at 11:30am on January 26, 2019.

**All Vendors:**

All vendors must provide a copy of their general liability insurance naming Saint Paul Festival and Heritage Foundation as an additional insured. The amount should be no less than \$1,500,000 per incident. Name of insured on certificate of insurance must match the company name listed on this application.

*I have read, understood, and agreed to the conditions stated in this multiple page agreement, including the "Rules and Regulations for All Vendors" and have provided truthful and complete information.*

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

Return form to [vendor@spfhf.org](mailto:vendor@spfhf.org) no later than Monday, January 7, 2019. For registrations submitted after this date, please include a \$50 late fee. Please make checks payable to "SPFHF" and mail to: Winter Carnival, 75 W 5<sup>th</sup> St, Suite #429, Saint Paul, MN 55102.

**Please review the rest of this application for rules and regulations. Contact [vendor@spfhf.org](mailto:vendor@spfhf.org) with questions.**



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## **Rules and Regulations for All Vendors**

1. All business or other activity for which the Vendor has reserved space must be conducted in your designated area. Use of excessive noise, such as loud music, singing, or megaphone is prohibited unless pre-approved.
2. All approved Vendors are required to be open on the specified date and time as listed above. Vendor check-in opens one (1) hour prior to set-up time designated in the above Event listing. All Vendors must check in one (1) hour prior to event in order to secure agreed upon space.
3. Neither Securian Financial Group, Inc. (together with its affiliates, subsidiaries, and representatives, "Securian") nor SPFHF take responsibility for any tickets issued by the City of St. Paul, St. Paul Police, Ramsey County, for vehicles breaking rules. Storage vehicles (trucks, cars, etc.) must be parked off grounds in a legal parking space.
4. It is the responsibility of the vendor to secure any permits and licenses (i.e., MDH Food permit, Minnesota Sales Tax, etc.). Vendors must supply a copy of their St. Paul Health Permit or Special Permit, Liability Insurance policy by **January 7, 2019**.
5. The Vendor affirms that they do not discriminate in hiring, employment, participation or services rendered based on the fact or perception of a person's race, color, creed, religion, national origin, ancestry, age, sex, sexual orientation, marital status, disability or as otherwise specified by governing law.
6. Acceptance as a Vendor by Winter Carnival does not imply endorsement or affiliation of the organization and/or individual. Vendors may not use Winter Carnival name and/or logos (including the Winter Carnival Logo) unless written approval has been given by Winter Carnival.
7. Any radio, web, or other electronic transmissions including video recording and photography for public use or personal gain is forbidden unless written approval has been given by Winter Carnival.
8. Vendor hereby releases, waives, and discharges SPFHF and Securian from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by Vendor, or to any property belonging to Vendor, while participating in the Winter Run and Winter Carnival, regardless of whether such loss is caused by the releases, or otherwise, and regardless of whether such liability arises in tort, contract, strict liability, or otherwise, to the fullest extent allowed by law.



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## Credit Card Payment Authorization Form

The Saint Paul Festival and Heritage Foundation (SPFHF) will use the following information solely for processing credit card transactions. SPFHF understands the privacy and confidentiality needs and will shred and properly dispose of this information. By signing this form, you are authorizing us to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction and does not provide authorization for any additional unrelated debits or credits to your account. Thank you for your support.

Account Type:  Visa  American Express  MasterCard  Check

Cardholder Name: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security code: \_\_\_\_\_ Amount: \_\_\_\_\_

I authorize Saint Paul Festival and Heritage Foundation to charge the card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services provided, for the amount above, and is valid for one use only. I certify I am an authorized user of this credit card and that I will not dispute the payment, so long as the transaction corresponds to the terms indicated in this form.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_