



Somers Annual SCARECROW Festival

FOOD TRUCK FORM

Name (First & Last): _____

Business Name: _____

Address: _____

Email: _____

Cell Phone: _____ Business Phone: _____

Detailed description of what you will be selling. Please list all products: _____

Please check off space:

☐ Food Truck \$75 w/115 amp

☐ Food Truck \$100 w/220 amp

In consideration for being permitted to participate in The Somers Scarecrow Festival, the Vendor agrees to the following terms:

To the fullest extent permitted by law, the Vendor agrees to defend, indemnify and hold harmless The Somers Scarecrow Festival, Inc., Union Agricultural Society, Inc. (also known as Four Town Fair), and their respective officers, employees, volunteers and agents from and against any and claims, actions, damages, losses, liabilities, and expenses (including but not limited, to reasonable attorney's fees) arising out of or resulting from the Vendor's participation in the festival, including the Vendor's operations, products, setup, or presence on the premises located at 56 Egypt Road, Somers, CT. The Vendor explicitly acknowledges that neither The Somers Scarecrow Festival, Inc. nor Union Agricultural Society, Inc. (aka Four Town Fair) provides liability insurance covering the Vendor's activities, products, or equipment. This includes, but is not limited to, claims arising from bodily injury, illness, death, or property damages caused by the Vendor's products (including claims related to food-borne illness and consumable goods), equipment, tent displays, or the negligence acts of the Vendor, their employees or agents. The Vendor agrees to participate at their own risk and assumes full responsibility for any loss, damage, or claim arising out of their festival activities. The indemnification and defense obligations stated in this agreement shall survive the completion or termination of the Vendor's participation in the festival.

All food products including dog treats, cosmetics, farm fresh and farm vendors must have all required licenses. All food vendors must have proper health certificates that must clearly be displayed. No alcohol sales are permitted.

Signature: _____

Name: _____

Date: _____

Mail this completed form and check, if applicable to:

The Scarecrow Festival, 619 Main Street, Somers, CT 06071. Checks should be made payable to: THE SCARECROW FESTIVAL

or email this form to

scarecrowfestivalsomers@gmail.com

Registration deadline is October 1, 2026. THERE ARE NO REFUNDS

Approval is only by email from the Scarecrow Festival stating receipt of application and/or payment.

NO DOGS allowed unless a service dog upon written approval from the Scarecrow Festival.