# St. Patrick's Parade, Inc.

### THE KINGSTON ST. PATRICK'S PARADE SUNDAY—MARCH 16, 2025—step off 12:50 PM VENDOR APPLICATION APPLICATION FEE \$250.00

Applicant Name: _ (required)			
Business Name _(required)			
Address: _ (required)			
Email Address: _ (required)			
Phones: (required) (W)	(H)	(Cell)	(Fax)
Quantity of Vendor Carts	Auto Lic. Plate #_(required)		
Make(required)	Model	Year	
*NYS Vendor License Or Tax N	umber: (requir	red)	
*City of Kingston, NY Vendor L	icense: (requir	ed)	

### **NO FOOD VENDORS ARE ALLOWED FOR THE PARADE**

Insurance Certificate naming The Parade Committee, Ulster County AOH Div 1 Ulster County LAOH Division 5 and the City of Kingston, NY as co-insured must be on file for you to attend\*\*\*THIS IS REQUIRED\*\*\*No refunds, exchanges, or transfers.

\*\*\*\*\*

In consideration of accepting this vendor application, I the undersigned, intending to be legally bound for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the Ancient Order of Hibernians, the City of Kingston Parks and any Department, the City of Kingston, and any and all sponsors, and their representatives, successors and assigns for any and all injuries suffered by me in this event.

Signature\_

#### NO FOOD VENDORS ARE ALLOWED FOR THE PARADE

\*\*Description of Items Offered for Sale: \_ (required) \_\_\_\_\_

#### THIS IS AN IRISH EVENT. YOUR ITEMS FOR SALE MUST HAVE RESPECTFUL IRISH ITEMS.

For Event Use Only Application Received: Area Assigned:

## THE PARADE, P.O BOX 2788, KINGSTON, NY 12402

# St. Patríck's Parade, Inc.

#### NOTES

\* NYS Vendor License or Tax Number and Insurance certificates must be submitted at time of application. \*

\*\* City of Kingston, NY Vendor License must be submitted at time of application. \*\*

\*\*\* The Parade Committee reserves the right of removal of any items for sale that are deemed offensive or inappropriate. \*\*\*

\*\*\*\* Vendors are limited and will be assigned on a first come, 'first served' basis. \*\*\*\*

\*\*\*\*\* The Area for Vendors does not allow stationary locations. NO tents or Canopies or devices that would cause a hole to be placed in the ground. \*\*\*\*NO Tents, Semi Permanent or Permanent Installations will be allowed. \*\*\*\*

#### To be GUARANTEED participation, ALL applications and payments

#### must be received by the Parade Committee by February 17, 2025.

No applications will be accepted after this date. No refunds. **Fee \$250.00** 

All Checks/Money Orders are to be made payable to THE PARADE (Memo: The Parade) and sent to THE PARADE PO BOX 2788 Kingston, NY 12402

#### Vendors

A certificate of insurance naming the Ancient Order of Hibernians and the City of Kingston as also insured must accompany all vendor applications.

\* NYS Vendor License or Tax Number and Insurance certificates must be submitted at time of application. \*

\*\* City of Kingston, NY Vendor Application/License must be submitted at time of application. \*\*

#### NO FOOD VENDORS ARE ALLOWED FOR THE PARADE.

#### Vendor Check-in

Access to The Parade site begins at 11:00AM. If vendors haven't been notified prior to this, vendors should call and confirm their participation. Vendors are responsible for providing their own supplies,

#### THERE IS NO PARKING IN THE IMMEDIATE PARADE ROUTE OR AREA.

The Parade officially begins promptly at 12:50AM with the opening ceremonies and will continue until 4:30 PM

Parade events will be photographed (both video and still) to develop promotional materials for future festivals. Vendor participation implies permission to use any images captured for promotion purposes.

Thank you for your support.

# THE PARADE, P.O BOX 2788, KINGSTON, NY 12402

Steven T. Noble Mayor

CITY OF KINGSTON

Elisa Tinti City Clerk

# **City of Kingston Event Vendor Application**

If merchandise vendors will be participating; a Kingston, NY vendor application must be submitted for each vendor Name of Vendor:

Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Name of Event: \_\_\_\_\_ Date of Event: \_\_\_\_\_

1. If applicant is employed list name and address of employer. Also list credentials establishing relationship

2. Applicant's driver's license # as issued by NYS Department of Motor Vehicle

3. If applicant proposes to operate a vehicle in connection with vending, please describe applicable below:

License # or other identification Cart \_\_\_\_\_ Vehicle

License # or other identification \_\_\_\_\_\_ License # or other identification

License # or other identification Other 4. Description of goods, wares and merchandise desired to sell or the type of service applicant desires to perform and method of distribution.

5. If the applicant is a corporation or association, the name address and title of the officer upon whom process or other legal notice may be served:

6. New York State sales tax identification number or social security #:

7. It is the responsibility of the vendor to secure approval from the Ulster County Health Department to serve or sell food 8. 8.No Alcohol may be served or sold without proper licensing through the New York State Liquor Authority

9. A certificate of liability insurance in the amount of \$1,000,000 (one million) listing the City of Kingston as an additional insured must accompany this application.

#### HOLD HARMLESS AGREEMENT (PURSUANT TO SECTION 61-5(F) OF THE CITY OF KINGSTON CODE

It is hereby agreed and understood by and between \_\_\_\_\_

\_\_\_\_\_, hereinafter referred to as "Vendor", and the City of Kingston, hereinafter referred to as the "City" that the "Vendor" or heirs, executors, administrators, successors and assigns agrees to hold harmless and indemnify the "City" from all actions cause of actions, suits, debts, dues, sums of money, accounts, reckonings, bonds, bills, specialties, covenants, controversies, agreements, promises, variances, trespasses, damages, judgments, extent, executions, claims, and demands whatsoever in law, admiralty or equity arising out of the "Vendor's" business within the City of Kingston.

Vendor Applicant (print name) Vendor Applicant Signature

Dated: \_\_\_\_\_ day of \_\_\_\_\_ month, \_\_\_\_\_ year

The issuance of a "Vendor Permit" does not guarantee you a particular space. The City of Kingston and other groups, sponsor events in various locations throughout the City.

It may be necessary for you to move your vending operation during these events if said operation interferes with the event.

Vendor Applicant (print name)

Vendor Applicant Signature

## **THE PARADE, P.O BOX 2788, KINGSTON, NY 12402**