

Garland City Wheat & Beet Days Celebration

Friday & Saturday – August 1-2, 2025

BOOTH/CONCESSION APPLICATION

Name of Business/Organization: _____

Contact Person: _____

Owner's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

****Vendor applicants must be at least 18 years old to rent booth space****

*The following information must be provided. It is used for issuing temporary licenses and reporting to the Utah State Tax Commission:

Special Event ID# or Sales Tax Account ID# or Social Security # or Federal Employer ID# or Taxpayer ID#: _____

Booth Spacing = 10 x 10 space *you will need to provide your own shade cover.
_____ \$50.00 power not required _____ \$75.00 power required

Food trucks MUST provide their own source of power.

* Item(s) to be sold:

All food vendors must contact the Bear River Department of Health for a temporary food establishment permit and necessary requirements at 440 W. 600 N., Tremonton, UT 84337 - 435-257-3318

Please return your application along with the booth fee to: Garland City PO Box 129
Garland, UT 84312

Or by email to office@garlandutah.org

We can accept Cash, Checks, or Credit Cards

Any questions, contact the Garland City Office @ 435-257-3118

Garland City Wheat & Beet Days Vendor Acknowledgment, Understandings and Agreement

1. I understand that I am responsible for my adherence to all County and State requirements and regulations, such as those applicable to taxation and food preparation/handling.
2. If involved in cooking and/or the use of other combustible materials, I agree to maintain at my assigned booth a fully charged fire extinguisher appropriate to the abatement of possible fire.
3. I agree to save and hold harmless the City, its agents, employees, officials, contractors, and volunteers from all claims associated with damages, including death, property loss, illness, and injury resulting from my participation in the Garland City Wheat & Beet Days Celebration. I further understand that I am responsible for maintaining private liability insurance sufficient to appropriately manage the risk associated with my activities.
4. I agree to submit to spot inspection of my booth by authorized agents of the City, the Garland Fire Department, or the Bear River Health Department.
5. I understand and accept that the City may, at its discretion, discontinue my participation and/or vending activities at the Celebration if it is determined that I have violated any law, code, or stipulation of this Agreement.
6. I agree to refrain from involvement in any of the following activities: gambling or gaming, selling of controlled substances, exhibition or selling of firearms, lewd and lascivious behavior, selling of alcohol and/or tobacco products, exhibition or demonstration of pyrotechnic products, use of loud music or sound effects (unless preauthorized by the City), and any other activity which violates State or local code and/or disturbs the general repose and wellbeing of Celebration patrons.
7. I agree to set up and remove my booth and/or property and equipment in the times and manner directed by the City.
8. I understand that Garland City reserves the right to limit the number and variety of vendors to ensure a diverse mix of services to our patrons for Garland City Days.

By signing below, I understand and agree to adhere to the above directives in connection with my participation in the Garland City Wheat & Beet Days Celebration.

Signature: _____ Date: _____