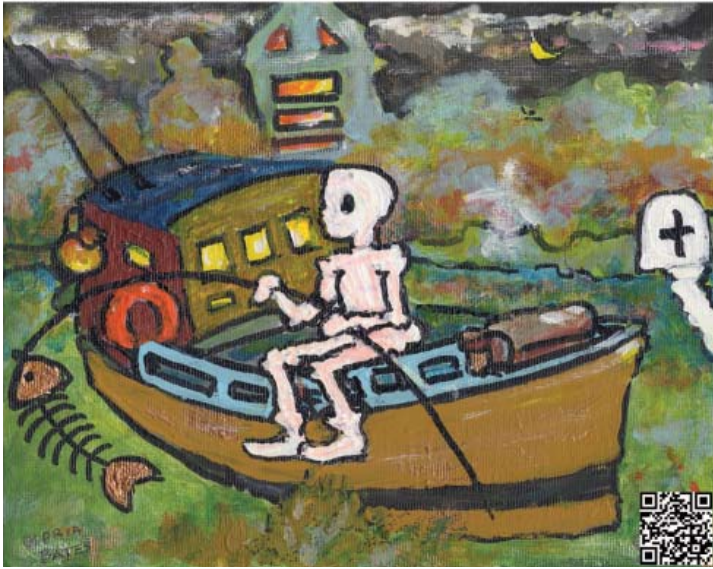


# Port Isabel's Day of the Dead **CELEBRATION**



## Museums of Port Isabel Day of the Dead

10/29/2011 1:00 - 7:00 p.m. (Setup at 12:00 noon)

### VENDOR REGISTRATION

Museums of Port Isabel Annual Colores del Muerto Day of the Day Festival Vendor Registration information:

In order to participate in the Port Isabel's Los Colores del Muerto, ALL VENDORS must agree to the following provisions by agreeing below.

1. The City of Port Isabel reserves the right to remove any vendor at any time, for any violation of the regulations set forth in the current year's information regarding the City of Port Isabel's Los Colores del Muerto.

2. In consideration of the use of one or more spaces by the undersigned vendor participation in Port Isabel's Los Colores del Muerto, the undersigned agrees

to defend, indemnify, and hold harmless the City of Port Isabel, its officers, agents, employees, and members from and against all liabilities, claims, suits, or demands for injuries to any person and/or property arising out of the undersigned's injuries to persons he or she may cause by participating in such activities.

3. NO VENDOR shall sell any illegal items or items that infringe on registered trademarks.

4. Electricity – You must bring your own heavy-duty extension cord, 100' or 200' is sufficient. Cords across walkways must be taped. Do not overload outlets — do not use more than normally used on one household outlet. DO NOT RUN FANS, HEATERS OR OTHER PERSONAL CONVENIENCES.

5. ATTENTION VENDORS: No sale of soft drinks, water, or other beverages allowed without prior permission. This request will be enforced. This is a rain or shine event.

6. No vehicles on premises.

ATTN: ALL VENDORS must have a Texas Sales Tax Number.

FOOD VENDORS must provide a copy of permit from Texas Department of Health.

### REGISTRATION

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Product: \_\_\_\_\_

Electricity? \_\_\_\_ Yes or \_\_\_\_ No

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