



Down Syndrome Society of Wichita
Parade of Stars 2019 Vendor Registration
 October 12, 2019 • Central Riverside Park, Wichita, KS

Company/Organization Name: _____

Contact Name: _____

Title/Role: _____ Phone: _____ Cell: _____

Area of interest (circle one): Food Trucks Community Resources Other

Address: _____ City: _____ State: _____

How many representatives will attend? _____

Website address: _____

Short description of org/items: _____

Additional notes or special accommodations needed? If so, please list here. We will contact you for further details and information: _____

Food Vendors Only – information required by city

Driver's License #: _____ Birthdate: _____

City Mobile Food Vendor License Number (must be current) _____

KDA Food Est. License (FEL) # and/or Mobile unit License # if applicable

I, the vendor/company and authorized agent or representative do hereby waive and forever release any and all right and claims for damages or injuries that I may have against the Down Syndrome Society of Wichita, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees. Further, I grant permission to all the foregoing to use my name, voice and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic recording of this event for legitimate purposes.

Vendor Representative (signature) _____ Date _____