



Family Fun Fest & Chili Cook-Off
Saturday, September 27, 2025 • 1pm to 5pm
JK Northway Center • 501 E Escondido Rd, Kingsville, TX

Vendor Registration

Business Name _____ ☐ Non-Profit
Contact Address _____
E-mail Address _____ Phone Number _____

\$75 Donation (Waived for non-profits)

- Deadline for registration is Friday, September 12, 2025.
- 10x10 space provided.
- Booth locations will be on a first-come, first-served basis.
- Booths for non-sales vendors, will be located inside. Sales booths will be located outdoors.
- If not a sales table/vendor, booth vendors are asked to provide either a child friendly activity, game or giveaway.
- Vendors are responsible for providing their own setup (table/chairs/canopy, etc.).
- Canopies **must** be staked or weighted down, if located outdoors.
- Electricity will be available, if located indoors. Generators must be cordoned off for safety purposes.
- Vendors/Tables must arrive for setup between 11:30am and 12:30pm to be ready for attendees by 1pm.
- Tear-Down will be at 5pm.

Description of items (merchandise/products) to be sold or activity to be provided:

Vendor Terms, Waiver, and Agreement

Submitting this application is a request to participate at the 2025 Family Fun Fest & Chili Cook Off and does not guarantee a reserved spot. Application will be taken into consideration and a Festival Representative will contact you in writing with approval or non-approval status. All participating Vendors agree to the following terms:

1. Waiver of Liability and Hold Harmless Agreement

The vendor assumes full responsibility for any risk, damage, or injury arising from their participation in the event. CoastLife Credit Union, the FOCUS Foundation, event organizers, sponsors, staff, and volunteers will not provide insurance coverage or accept liability for any personal injury, loss, theft, damage, or other incidents involving the vendor, their staff, equipment, or merchandise. The vendor hereby waives, releases, and discharges the above-mentioned parties from any and all claims or liabilities arising from their participation, and agrees to indemnify and hold harmless said parties from any resulting damages, legal fees, or claims brought by third parties.

2. Prohibited Items

To maintain the quality, integrity, and family-friendly nature of the event:

- The sale of deemed items such as, but not limited to: CBD or Smoke Shop items, political items, garage sale items, used goods, or secondhand merchandise is strictly prohibited.
- Only new, handmade, or commercially produced items in clean and sellable condition will be allowed.

Violation of this policy may result in the removal of specific items and/or vendor dismissal from the event without refund.

3. Item Approval and Vendor Conduct

The FOCUS Foundation and CoastLife Credit Union reserve the right to approve or deny any merchandise, product, or service to be displayed or sold at the event. They also reserve the right to cancel a booth or remove any items or activities deemed, in their sole discretion:

- Inconsistent with the quality or values of the event,
- Inappropriate for a family-friendly audience, or
- In conflict with CoastLife Credit Union's brand, mission, or services.

4. Food, Beverages, or edible items

Edible items are not allowed to be sold in the vendor area unless a valid Health Permit is presented.

Vendor Acknowledgment:

By signing below, I acknowledge that I have read, understood, and agree to abide by the terms outlined above

Print Name

Signature

Date

All net proceeds of the event will go directly to the FOCUS Foundation (For Our Children's Ultimate Success) a 501(c)3 non-profit benefiting the Children in our communities in Aransas, Duval, Jim Wells, Kleberg, Nueces and San Patricio Counties.

Make checks payable to the 'FOCUS Foundation'. Fax the form to (361)986-0176, email to FOCUS@MyCoastLifeCU.com, or mail to FOCUS Foundation, c/o CoastLife Credit Union, 6810 Saratoga Blvd., Corpus Christi, TX 78414.

For more information, contact Sondra Harrell at (361)271-0982 or Sondra.Harrell@MyCoastLifeCU.com.

Scan to pay with
Cash App!



INTERNAL USE ONLY:

Employee Name: _____
(Please Print)

Date Submitted: _____