



Thank you for your interest in participating in Bryson City's largest event, Freedom Fest!

In this packet you will find everything you need to successfully apply to be a Freedom Fest vendor, including the application, a participation waiver, an information page, and a vendor map showing the designated vendor areas, how to enter and exit those areas, and suggested parking areas. For food vendors only you will also find a TFE application from the Swain County Health Department.

You will return the application, signed waiver, photos, product summary and check to the Chamber.

If you are a food vendor, you will return the TFE application and payment to the Swain County Health Department. This is not necessary if you are a licensed and inspected food truck or if your product does not have to be inspected by the Health Department (shave ice, ice cream, boiled peanuts, etc.) If you have any questions concerning health inspections, please call the Swain County Health Department at 828-488-3198.

Please review the information carefully and if you have any questions, please email Karen at chamber@greatsmokies.com or call the office at 828-488-3681.

Thank you again and I hope you decide to join us at Freedom Fest!

Karen Proctor
Executive Director, Swain County Chamber of Commerce
Freedom Fest Event Organizer

We are now offering an "Early Bird Special" on booth fees! Receive 10% off your booth and electrical fees if your application and payment are received by April 1, 2024!

FREEDOM FEST CRAFTER/VENDOR APPLICATION — Bryson City, NC — Thursday, July 4, 2024

Booth Name _____ Date _____

Contact Person _____ Phone _____ Email _____

Address _____ City _____ State _____ Zip _____

Event Policy and Procedures:

- 1. Crafter application and booth fee must be received by 5pm, Friday, June 20, 2024**
- 2. Food vendor application and booth fee must be received by 5pm, Thursday, June 13, 2024**
- Cancellation policy: No rain date. If you are accepted and then must cancel by 5pm on April 1 your fee will be fully refunded. After April 15, 50% of the fee will be refunded. After May 1, there are absolutely no refunds.
- Booth set-up begins at 5am and must be completed by 10am. Anyone arriving after 9am to begin setup will be denied entry into the festival.
- Section A must remain open until 10pm and Sections B & C must remain open until 6pm. **NO EXCEPTIONS.**
- 6. No tent poles, trailer hitches, tables, etc. is permitted beyond your space. Violators will be asked to leave.**
- 7. Crafters:** All craft items must be handcrafted by applicant only or be a Chamber member business in good standing. **No product resales allowed.** • Applicant/crafter must be present in booth during event. Photos of craft and booth setup from previous festival(s) must be included with completed application. Minimum of 5 photos; one must be of crafter at work. • **Brief description of craft must accompany photos.**
- 8. Food vendors must include menu and proof of insurance with application. Swain County Chamber of Commerce must be listed as additional insured for this event.**
- Paying vendors/crafters will receive first placement; complimentary, i.e., non-profit, spaces will be awarded after others have been placed.
- Non-profit Organizations: Fee waived on one space only, additional spaces(s) will be subject to above listed fee(s) Electrical hookup fee of \$35 must be paid. **Certification of non-profit status must accompany application**
- 11. No vendor – including non-profit organizations – is to give away merchandise for any reason.** Raffles and drawings for prizes are acceptable only if tickets are purchased at the event.
- The Swain County Chamber of Commerce reserves the right to refuse any application according to the bylaws of the Swain County Chamber of Commerce.
- All applicants/products must be consistent with theme of event & policies of Swain County Chamber of Commerce.
- 14. No vendor/crafter will be accepted without meeting all the above requirements.**

Make checks payable to: Swain County Chamber of Commerce/Freedom Fest

Mail to: Swain County Chamber of Commerce, PO Box 509, Bryson City, NC 28713

Fees: (All Crafter & Tent Food Spaces are 10 x 10) Please circle your choice of space below & if you need electrical hookup

Section A Standard Crafter Spaces: \$85 each • Section A Corner Crafter Spaces: \$95 each

Section B & C Corner Crafter Spaces: \$75 each • Section B & C Standard Crafter Spaces: \$65 each

Food Vendor Space (Tent): \$125 each • Corner Food Vendor Space (Tent): \$135 each

Food Vendor Space (Trailer 25ft long): \$250.00 each • Food Vendor Corner Space (Trailer 25ft long): \$270.00 each

Electrical Hookup: \$35 per vendor Reason for and voltage needed _____

Note: electrical will only be provided for operations essential to running of booth **NO GENERATORS ALLOWED**

Number of spaces _____ Amount enclosed _____ Tents must be freestanding & anchored with weights

Please note that tables, chairs and tents are not provided – vendor is responsible for providing these items.

The undersigned agrees that if accepted to participate, they will comply with all policies, procedures and regulations included in this application, and agree to be bound and comply with all Freedom Fest documents. The undersigned understands that Swain County Chamber of Commerce is responsible for making final decisions with regard to the event operations and agrees to abide by their decisions.

Print Name _____

Signature _____

Event Contact: Karen Proctor, Swain County Chamber of Commerce, 828-488-3681 Email: chamber@greatsmokies.com

Swain County Chamber of Commerce
Release of Liability and Assumption of Risk

Name of Event _____ Date of Event _____

I, _____, for and in consideration of my participation in the above-named event, I hereby assume absolutely and unconditionally all risks which are or may be associated with my participation in the above-named event. The risks I assume include also those risks which are unknown as well as those that are known. I understand that in assuming these risks, I agree that under no circumstances will I or any person claiming through me make any claim or suit for personal injury, property loss, or death against the Swain County Chamber of Commerce, partners, officers, or employees alleging negligence, strict liability on the part of any of them. I also agree to indemnify, defend, and hold harmless all such persons as aforesaid for any claims for personal injury, theft, damage, or loss which may be made against any such person connected with or arising out of the above-named event.

I understand also that (1) the Swain County Chamber of Commerce are relying on my agreement to these terms in granting me permission to participate in the above event; (2) In signing this waiver I acknowledge that I am in a physically fit enough shape to engage in this activity and I do not currently have any medical restrictions that would exclude me from engaging in this type of activity; (3) my agreement to these terms is intended to release and absolve the Swain County Chamber of Commerce (and its associated persons) from liability to the maximum extent.

I give my permission to the Swain County Chamber of Commerce the right to take, use, reproduce, edit, photograph, record, broadcast, and otherwise exploit in all medial, in whole or in part, including for commercial, promotion of the Swain County Chamber of Commerce and event, my and/or my minor child(ren) or ward's image, likeness, voice, name and biographical information in connection with the event and release the Swain County Chamber of Commerce from all claims, demands, suits, and liability that I or my successors and assigns may have for such use.

I have read and understood the above.

Signature _____ Date _____ Print Name _____

Guardian Signature _____ Date _____ Print Name _____

Witness Signature _____ Date _____ Print Name _____

FREEDOM FEST CRAFTER/VENDOR INFORMATION — Bryson City, NC — Thursday, July 4, 2024

PLEASE READ CAREFULLY & RETAIN FOR REFERENCE

- **Registration:** To participate, complete the attached application and return it with your entry fee.
You are not given a space until payment is received. To make a credit card payment over the phone, please call Karen at 828-488-3681. You may also pay online at www.greatsmokies.com/chamber-store

Crafter Application and fee must be received by 5pm, Friday, June 20, 2024.

Food Vendor application and fee must be received by 5pm, Thursday, June 13, 2024.

YOU WILL NOT BE INCLUDED IN THE EVENT IF FEE IS NOT PAID PRIOR TO THE EVENT

Please remember to include all documents with your application:

Food: proof of insurance & menu • Crafters: 5 photos & summary of craft

Non-profits: proof of non-profit status

Upon receipt of your payment and application you will receive an email or call confirming your acceptance.

Food Vendors: this is a first come, first serve festival. THERE WILL BE NO MORE THAN 3 VENDORS OF ONE TYPE IN THE FESTIVAL (SHAVE ICE, LEMONADE, ETC.) PLEASE SUBMIT YOUR APPLICATION PROMPTLY.

- **Booth Assignment Notification:** you will be emailed no later than Friday, June 28 with your booth number and other information. **Please make certain that the contact email you provide is correct.** If you do not use email, please make certain that the contact phone number you provide is correct.

- **Times of Operation:**

Section A must remain open until 10pm. No breakdowns until 10pm.

Section B & C must remain open until 6pm. No breakdown until 6pm.

- **Booth set-up can begin as early as 5am on July 4 and must be completed by 10am. No vehicles will be admitted into the festival after 9am. It is strongly recommended that food vendors arrive as early as possible in order to maneuver their trailers.**

WHEN ARRIVING, PLEASE UNLOAD VEHICLE IN SPACE AND IMMEDIATELY GO PARK VEHICLE (SEE PARKING INFORMATION BELOW). RETURN TO BOOTH TO CONTINUE SETUP.

- **Break Down:** PLEASE BREAK DOWN AND HAVE EVERYTHING READY TO IMMEDIATELY PLACE IN THE VEHICLE BEFORE BRINGING YOUR VEHICLE BACK ONTO THE STREET. IF LEAVING BEFORE 10PM, PLEASE FIND EVENT STAFF TO WALK YOUR VEHICLE SAFELY ONTO THE STREET.
- All food vendors are responsible for trash/cooking oil removal & disposal. All food vendors must remove trash to event dumpster location before leaving the festival.
- **ALL VENDORS – EXCEPT THOSE ON THE BRIDGE – are to set up on yellow line in center of street.** You may only set up 5 feet on either side of the yellow line so as not to impede emergency vehicle access (your space is 10x10). If you anticipate needing more space, please purchase another space. **Those on the bridge will set up along the bridge railing.**
- Any vendor requesting electricity is responsible for providing their own drop cords and duct tape. All cords exposed to pedestrian traffic must be taped down. **Electrical hook up is not guaranteed until 10am.** Generators are not allowed in the festival for any reason.
- Vendors who leave early, do not abide by Festival Rules, or who fail to use common sense and courtesy to other vendors or event staff will not be allowed to participate in the future.

Parking: Parking is available at the Swain County Courthouse, the post office, and United Community Bank, all of which are located on Mitchell Street. Additional parking is available on Island Street, Bryson Street, the Town Hall lot, and at the lot on Main Street behind the visitor center.

Attendance Numbers: Average 9,000

Event Contact: Karen Proctor, Swain County Chamber of Commerce

Work: 828-488-3681, chamber@greatsmokies.com, Cell: 828-508-2795

FREEDOM FEST 2024 VENDOR INFORMATION MAP



VENDOR ENTRY, EXIT & PARKING INFORMATION

Area A - Main Street to Island Street. Vendors must remain open until 10pm

Morning Entry - from Main Street Morning Exit - to Island Street

Evening Entry - from Main Street Evening Exit - to Island Street

Suggested Parking: Town Hall, or the municipal parking behind the Visitor Center using the drive beside Everett Hotel.

Area B - Island Street to Mitchell Street intersection, including the Hallmark Parking lot. Vendors must remain open until 6pm

Morning Entry - from Mitchell Street Morning Exit - to Island Street

Evening Entry - from Mitchell Street Evening Exit - to Island Street

Area C - Mitchell Street intersection to railroad tracks Vendors must remain open until 6pm

Morning Entry - from Mitchell Street Morning Exit - to Mitchell Street Bank.

Evening Entry - from Mitchell Street Evening Exit - to Mitchell Street

Suggested Parking for Area B & C: County Courthouse, Post Office or United Community Bank. Off-street parking on Bryson Street.

BOARD OF COMMISSIONERS

PHIL CARSON, CHAIRMAN
ROBERT WHITE, VICE-CHAIR
DAVID MONTEITH, MEMBER
DONNIE DIXON, MEMBER
STEVE MOON, MEMBER

HUMAN SERVICES BOARD

INTERIM DIRECTOR

KEVIN KING



SWAIN COUNTY

HEALTH DEPARTMENT

INTERIM DIRECTOR

ALISON COCHRAN

ADDRESS:

SWAIN COUNTY HEALTH DEPT.
545 CENTER STREET
BRYSON CITY, NC 28713
PHONE: 828.488.3198
FAX: 828.488.8672

Swain County Temporary Food Establishment Vendor Application

Each food vendor must submit a completed Temporary Food Establishment application to coordinator to be submitted to department **at least 15 calendar days prior to event**. Permit fee(s) shall be submitted along with application. Each question must be answered or the application will be considered incomplete.

Application Submission Date: _____

Event Name: _____

Event Location: _____

Event Date(s)/Time(s): _____

Proposed Date/Time for Pre-Opening Inspection: _____

**** This will be determined by the Swain County Health Department and Event Coordinator**

Booth Name/Business Name: _____

Owner/Operator Name: _____

Owner/Operator Address: _____

Owner/Operator Phone (7:45am-4:45pm): _____ Other: _____

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**SWAIN COUNTY****HEALTH DEPARTMENT****INTERIM DIRECTOR**

ALISON COCHRAN

ADDRESS:

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 545 CENTER STREET
 BRYSON CITY, NC 28713
 PHONE: 828.488.3198
 FAX: 828.488.8672

Type of Setup: ☐ Tent ☐ Trailer/Self Contained Unit ☐ Other _____

Hand Washing: ☐ Plumbed Sink ☐ Gravity Flow container with push button/flip nozzle
 (At least 2 gallon container with unassisted free flowing faucet)

Utensil Washing: ☐ Plumbed sink with drain board/counter top for air drying
 ☐ Separate tubs for wash, rinse, sanitize with drain board/counter top for air
 Drying

Water Source: ☐ On-Site Municipal ☐ Sealed Bottled Water
 ☐ Brought from permitted establishment (Attach permitted letter from owner)
 ☐ Other _____

Wastewater Disposal: ☐ Provided By Event
 ☐ Return to Permitted Establishment (Attach permission letter from owner)

Garbage Disposal: ☐ Provided by Event ☐ Other _____

Will all foods/beverages be prepared at the event? ☐ Yes ☐ No

If no, attach a letter signed by the owner of a permitted establishment listing each menu item that will be prepared by the establishment. Owner must include contact information. Domestic kitchens shall not be used.

Menu items are subject to approval and may be restricted

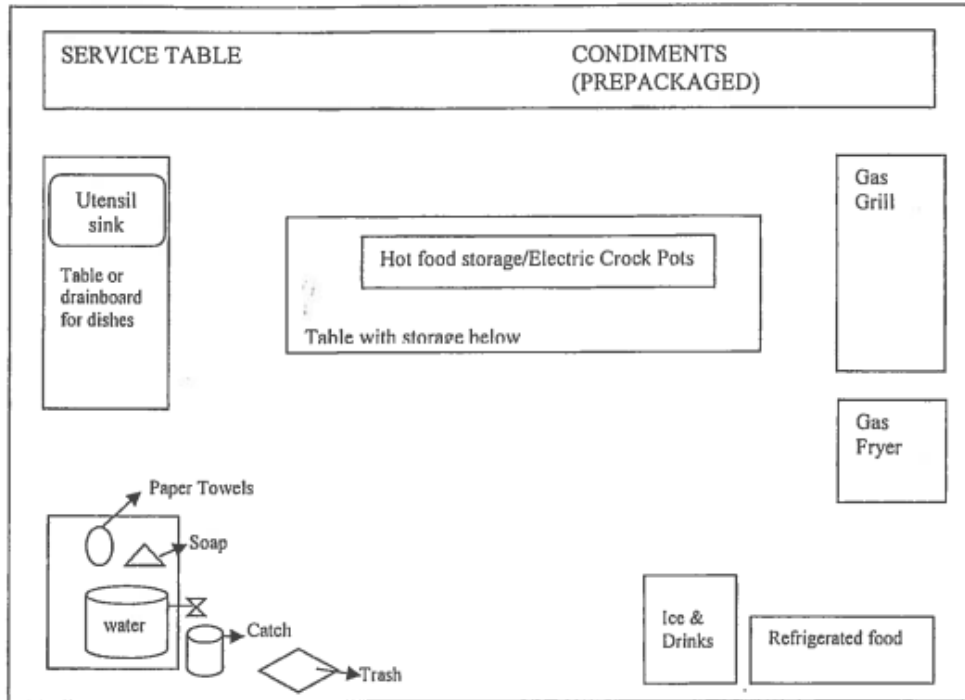
Food/Beverage Ex: Hamburgers	Source/Transport Method Ex: Frozen patties from Sam's by cooler w/ice	Prep/Cooking Procedures Ex: Transfer from cooler to grill	Hot/Cold Handling Ex: Hold in Crock Pot w/Broth	Cooking & Holding Equipment Ex: Gas grill w/steam table

***Any foods requiring preparation prior to the event must be approved and permitted by the Swain County Department of Public Health and event coordinator. (i.e. BBQ, dough for fry bread) Any foods prepared without permission from the department will be discarded. Food booth must be completely set up prior to permitting.**

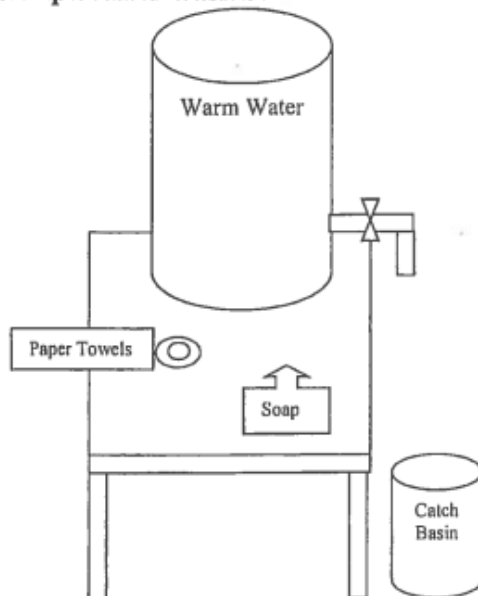
EXAMPLE LAYOUT

10x10 Tent

Front Customer Service



Example Hand-wash Station



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Equipment Layout Diagram:

Please provide a layout of proposed set-up including all equipment used for cooking, hot holding, cold holding, hand-washing facilities, work tables, utensil washing facilities, etc.

*Application will be returned if this section is not filled out completely

I hereby certify that the above information is correct and I fully understand that any deviation from the above without prior consultation with Swain County Department of Public Health may nullify final approval and prevent issuance of a temporary food establishment permit. I understand that incomplete/incorrect applications will not be processed.

Signature Owner/Operator: _____

Date: _____