The 49th Annual

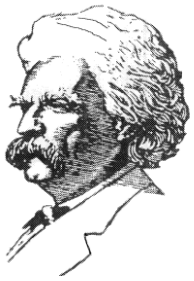
SAMUEL L. CLEMENS ARTS & CRAFTS AND MORE FESTIVAL

Sponsored by the

KIWANIS CLUB OF HANNIBAL FOUNDATION

During National Tom Sawyer Days

July 3-5th, 2026



FOOD VENDOR APPLICATION

Business Name:_____ Date: _____

Missouri Tax ID #: _____ Are you exempt? _____

Owner/Operator: _____

Phone #: _____ Email: _____

Mailing Address: _____

_____

Items to be sold (be specific as items not listed may not be allowed. Use additional paper if needed.)

_____

_____

_____

_____

Are you working out of a trailer or tent? _____ Electric needs: _____

Please include payment with your application payable to Kiwanis Club of Hannibal Foundation. If fees are not received on time, your space will be awarded to the next applicant. Deadline for new applicants is May 1, 2026. Spaces are $500 each, that includes electricity and water. Health permit is $10 and must be paid in advance at the Marion County Health Department.

Also, please read, complete and execute the hold harmless agreement, release and indemnity agreement on page two of this application.

Please mail application along with a photo of your setup to:

Sign: _____

Date: _____

Kiwanis Club of Hannibal Foundation
PO Box 567
Hannibal, MO 63401

RELEASE AND INDEMNITY AGREEMENT, AND AGREEMENT TO PROVIDE INSURANCE CERTIFICATE

WE WISH TO PROVIDE FOOD AT THE KIWANIS CLUB OF HANNIBAL FOUNDATION ("KF") ARTS AND CRAFTS AND MORE EVENT ("EVENT"). IN CONSIDERATION THEREFOR, I, WE AND OUR ENTITY RELEASE, HOLD HARMLESS AND AGREE TO INDEMNIFY AND WAIVE ALL CLAIMS AGAINSTKIWANIS INTERNATIONAL AND KF AND ALL THEIR MEMBERS, AFFILIATES AND VOLUNTEERS, TOM SAWYER DAYS SPONSORS AND PLANNERS, AND THE CITY OF HANNIBAL, MISSOURI, FOR AND FROM ANY AND ALL LIABILITY FOR THEIR NEGLIGENCE IN CONNECTION WITH THE EVENT AND FOR AND FROM ALL LIABILITY IN CONNECTION WITH FOOD SALES AT THE EVENT, AND ALSO I, WE AND OUR ENTITY RELEASE AND HOLD HARMLESS AND AGREE TO INDEMNIFY AND WAIVE ALL CLAIMS AGAINST KIWANIS INTERNATIONAL AND KF AND THEIR MEMBERS, AFFILIATES AND VOLUNTEERS, TOM SAWYER DAYS SPONSORS AND PLANNERS, AND THE CITY OF HANNIBAL, MISSOURI,FOR AND FROM ANY AND ALL LIABILITY FOR INJURY, DEATH, PROPERTY DAMAGE, FEES, COSTS, ACTIONS, LOSS, DISEASE, CLAIMS, SUITS OR OTHER LEGAL EXPENSE AND LIABILITY CAUSED DIRECTLY OR INDIRECTLY BY THE UNDERSIGNED VENDOR OR ITS AGENTS, VOLUNTEERS OR EMPLOYEES. FURTHER, I AGREE, TO FURNISH KF AT LEAST 14 DAYS PRIOR TO THE EVENT, A CERTIFICATE OF INSURANCE IN AN AMOUNT NOT LESS THAN ONE MILLION DOLLARS COMBINED SINGLE LIMIT, NAMING KF AND KIWANIS INTERNATIONAL AS ADDITIONAL INSUREDS, COVERING BODILY INJURY, DEATH AND PROPERTY DAMAGE. I AGREE TO HAVE SAID INSURANCE COMPANY AS A FIRM OBLIGATION, NOTIFY KF IN WRITING AT LEAST 30 DAYS PRIOR TO ANY CANCELLATION OR MATERIAL CHANGE IN SAID INSURANCE CERTIFICATE.

SIGNATURE: _____ DATE: _____

PRINTED NAME: _____

PHYSICAL ADDRESS: _____ PHONE #: _____

VENDOR BUSINESS NAME AND ADDRESS: _____

_____