



Amelia Day Festival Committee

P.O. Box 663, Amelia, Virginia 23002

www.ameliadayfestival.org

www.facebook.com/ameliadayfestival

2026 Amelia Day Festival – Food Vendor Registration

The Amelia Day Festival Committee is excited to announce the **2026 Amelia Day Festival is Saturday, May 9, from 9:30 am to 4:30 pm** (time subject to change). The 41st year of the festival takes place in the historic Courthouse Square and includes food, arts, crafts, and live entertainment. Your participation in this event is needed to ensure all patrons have delicious food and drink options.

The price for each 12ft x 12ft space is:

For-Profit: \$65 if registration and payment are received by February 28, 2026. If registration and/or payment are received after February 28, the price is \$85.

Non-Profit: \$50 if registration and payment are received by February 28, 2026. If registration and/or payment are received after February 28, the price is \$60.

If, on festival day, it is determined that your set-up is larger than 12ft x 12ft, you will be required to purchase additional space(s), if available, at the late registration rate. If additional space(s) is not available, you will be unable to set-up participate. If this occurs, no refunds will be issued. To avoid this situation, measure your set-up and register accordingly.

Spaces are assigned by the Festival Committee. Special requests for spaces will be honored where possible. Prior to the festival, we will email you the festival map and your assigned booth number.

A limited amount of electricity will be available for use for an additional fee of \$10.00. If you choose this option, you must bring a minimum of 150ft, heavy duty extension cord. Portable generators may be used, but must be marketed as no or little noise. If your generator produces too much noise and interferes with entertainment, you will be asked to turn it off. Vendors must supply their own setup (i.e., canopy, table, chairs). You must also bring the necessary equipment to anchor your tent and anything else you bring. No music can be played from your booth.

On the morning of the festival, set-up time for food vendors with trucks/trailers is 6:00 am to 7:00 am. and setup time for vendors without trucks/trailers is planned for 7:00 am to 7:30 am. You must adhere to your setup time or risk losing your spot. All vehicles must be off the roads near the Courthouse Square at the end of your arrival window. Take down is after 4:30 pm. The streets will re-open to vendors after that time, once clear of pedestrians, and remain open until 7:00 pm.



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THE EVENT IS RAIN OR SHINE! Advance cancellation information will be aired on local TV and/or radio. You may also check our Facebook page on the day of the festival, if in doubt.

NO REFUNDS FOR ANY REASON!

Complete both the Amelia Day Festival Food Vendor Registration and the Virginia Department of Health Application for Temporary Restaurant Permit (unless you have an annual permit) and return as instructed below:

1. **Amelia Day Festival Food Vendor Registration:** Complete and return the registration along with payment for the space(s) and fees payable to the Amelia Day Festival Committee, P.O. Box 663, Amelia, VA 23002.
2. **Virginia Department of Health Application for Temporary Restaurant Permit:** Complete and return the application no later than 30 days prior to the festival, to the Health Inspector, P.O. Box 392, Amelia, VA 23002. Fees are not imposed on non-profit organizations. Please direct questions regarding the permit to the Amelia County Health Department at 804-561-2711.



Please be aware that only items listed on your Application for Temporary Restaurant Permit can be sold on Amelia Day. The Health Inspector will be performing on-site inspections the morning of the festival. A food space is required for the sale of any food and/or drinks.

The vendor registration and payment must be received no later than April 30, 2026 – if received after March 31, 2026, we cannot guarantee inclusion on advertising, maps, etc.

Any insurance risk is subject to your own personal insurance coverage, unless you have insurance coverage for your business/organization. To ensure proper coverage and mitigate any potential risks to you or your business/organization, please contact your insurance agent.

If you have any questions, please contact Joseph Easter, at 804-357-9452 or joseph@theeastern.net. We look forward to working with you.

Temporary Food Establishment Application

 <p>VDH VIRGINIA DEPARTMENT OF HEALTH <i>Protecting You and Your Environment</i></p>	<p>A COMPLETED APPLICATION AND ANY APPLICABLE APPLICATION FEE(S) MUST BE RECEIVED BY THE HEALTH DEPARTMENT AT LEAST TEN (10) CALENDAR DAYS PRIOR TO THE EVENT.</p>	
<input type="checkbox"/> \$40.00	Temporary Food Establishment Application Fee	
<input type="checkbox"/> \$0.00	Temporary Food Establishment application fee for churches, fraternal, school and social organizations, and volunteer fire departments and rescue squads that are exempt under §35.1-25 and §35.1-26 of the <i>Code of Virginia</i>.	
<input type="checkbox"/> \$0.00	Applicant with documentation of paying a Temporary Food Establishment Fee in the current calendar year.	
<input type="checkbox"/> \$0.00	Individual resident _____ locality participating in only one (1) temporary event per calendar year which is located in _____.	

<p><u>Event Information</u></p> <p>Event Name: _____</p> <p>Event Coordinator/Phone Number/Email Address: _____</p> <p>Event Location Address and Phone Number: _____</p> <p>Dates of Event: _____ To _____ Rain Dates: _____ To _____</p> <p><u>Vendor Information</u></p> <p>Vendor Business Name (include any trade, fictitious or "doing business as" names): _____</p> <p>Name of Owner: _____</p> <p>Booth Name (if different from vendor name): _____</p> <p>Vendor Address: _____</p> <p>Vendor Phone Number/Email Address: _____</p> <p>Onsite Person Name and Contact Email and Cell Phone: _____</p> <p>Set-up Date and Time: _____</p> <p>Dates of Operation: _____</p>	
<p>For Office Use Only</p>	<p>Approved by:</p>
<p>Signature:</p>	<p>Date:</p>

Temporary Food Establishment Construction

Overhead Covering	<input type="checkbox"/> Canvas	<input type="checkbox"/> Wood	<input type="checkbox"/> Plastic	<input type="checkbox"/> Other:
Floor:	<input type="checkbox"/> Asphalt	<input type="checkbox"/> Concrete	<input type="checkbox"/> Wood	<input type="checkbox"/> Other:
Walls(if applicable):	<input type="checkbox"/> Screens	<input type="checkbox"/> Concrete	<input type="checkbox"/> Wood	<input type="checkbox"/> Other:

Water Source <input type="checkbox"/> Permitted Waterworks/ Municipal Supply <input type="checkbox"/> Private Well Food Grade Hose Provided: <input type="checkbox"/> Yes <input type="checkbox"/> No	Wastewater Disposal (provided by): <input type="checkbox"/> Event Coordinator <input type="checkbox"/> TFE Operator Disposal Method:
Utensils and Equipment (check all that apply): <input type="checkbox"/> Single-Serve eating and drinking utensils <input type="checkbox"/> Multi use kitchen utensils	Handwashing Facilities(provided by): <input type="checkbox"/> Event Coordinator <input type="checkbox"/> TFE Operator
Type of Utensil Washing Setup: <input type="checkbox"/> Three basin setup <input type="checkbox"/> Shared three compartment sink(if pre-approved) <input type="checkbox"/> Three compartment sink within a food establishment	Type of Handwashing Facilities <input type="checkbox"/> Self-contained portable unit(with potable water and wastewater holding tanks) <input type="checkbox"/> Plumbed with hot and cold water under pressure <input type="checkbox"/> Gravity-fed water with spigot/bucket
Utensil sanitizer to be used: <input type="checkbox"/> Chlorine <input type="checkbox"/> Quaternary Ammonia <input type="checkbox"/> Other: _____	<i>Hand soap, single-use towels, and trash receptacle shall be provided at all handwashing sinks.</i>

Food Storage or Display Equipment: Identify all holding equipment (hot/cold) that will be used:	Cooking Equipment: Identify all cooking equipment that will be used:
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Toilet Facilities for Food Employees: <input type="checkbox"/> Event Coordinator <input type="checkbox"/> TFE Operator Method(if not provided by the event):	Electrical Supply: <input type="checkbox"/> Refrigeration or Freezer available <input type="checkbox"/> Lighting available
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Food Transportation: Identify how food will be transported to events:	Refuse Removal(provided by): <input type="checkbox"/> Event Coordinator <input type="checkbox"/> TFE Operator Method(if not provided by the event):
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I understand that a temporary food establishment permit will not be issued until it is verified that the application and information contain herein meets the Board of Health Food Regulations (Food Regulations) under 12 VAC5-421 et seq., any other pertinent local laws or ordinances, and has been signed and approved by the local health department. I attest to the accuracy of the information provided and agree to comply with the Food Regulations as it pertains to the operation of a temporary food establishment. I agree to allow access to the establishment during hours of operation and other reasonable times.

Applicant
 Name: _____ Signature: _____